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102d Congress — 1st Session • January 3, 1991–January 3, 1992

House Document

No. 125

FINANCIAL DISCLOSURE REPORTS
MEMBERS OF HOUSE OF REPRESENTATIVES
102d CONGRESS
JANUARY 1–DECEMBER 31, 1990
VOLUME 2 OF 2 VOLUMES

United States Congressional Serial Set

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FINANCIAL DISCLOSURE

REPORTS

OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES OF THE 102D CONGRESS

FOR THE PERIOD

January 1, 1990, to December 31, 1990

SUBMITTED TO THE CLERK OF THE HOUSE

PURSUANT TO 5 U.S.C. APP. 6 § 703

(Volume 2 of 2)

JULY 30, 1991.—Referred to the Committee on Standards of Official Conduct and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE

45-572 WASHINGTON : 1991

Donnald K. Anderson
Clerk

House Doc. No. 102-125

Patricia A. Bias, Director
Office of Records and Registration

Office of the Clerk
U.S. House of Representatives
Washington, DC 20515-6601

Standard of Offic. Cond.

July 30, 1991

RO2971
T2348

Honorable Thomas S. Foley
The Speaker
U. S. House of Representatives
Washington, D. C.

Dear Mr. Speaker:

I hereby submit the annual compilation of personal financial disclosure statements filed with the Clerk of the House of Representatives pursuant to the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §701 et seq.), and House Rule XLIV.

This compilation contains the personal financial disclosure statements and amendments thereto required to be filed by Members of the House pursuant to the Act and House Rule XLIV by May 15, 1991, and includes the financial transactions as reported therein which occurred between January 1, 1990 and December 31, 1990.

House Rule XLIV provides that the annual compilation of reports filed with the Clerk be printed as a House document by August 1 and contain all such reports sent to him by Members within the period beginning January 1 and ending June 15 of each year. This compilation is submitted accordingly.

With great respect, I am

Sincerely yours,

Donnald K. Anderson

DONNALD K. ANDERSON, Clerk
U.S. House of Representatives

Enclosure

ALPHABETICAL COMPILATION OF FINANCIAL DISCLOSURE REPORTS FILED BY MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES PURSUANT TO HOUSE RULE XLIV

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:08

HAND DELIVERED

Ronald K. Machtley
(Full Name)

62 Sigourney Road
(Mailing Address)

Portsmouth, Rhode Island 02871

Filer Status	[x] Member of the U.S. House of Representatives — State: R.I. District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 11

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [x]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

2551

Reporting Individual's Name

Machtley

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	114 Touro Street, Newport, Rhode Island						X					X															
	(½ owner of total value)						X					X							X								X 05/02/91
JT	313, 315, 317 Wolcott Avenue,																										
	Middletown, Rhode Island					X						X										X					
JT	119 Wampanoag Drive, Portsmouth,																										
	Rhode Island (½ owner)					X						X										X					

For additional assets and unearned income, use next page

2552

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Machtley

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Navy Federal Credit Union		x										x					x								
JT	Promisory Note - 114 Touro Street,																									
	Newport, Rhode Island (Sale)				x								x								x					
JT	Shearson Lehman		x								x		x						x							
S	Stocks listed below Advest - Stock Portfolio/Money Market		x								x		x						x							
JT	Savings Account, Bank of Newport		x										x					x								
DC	Stocks listed below Advest - Stock Portfolio/Money Market		x								x								x							
DC	Stocks listed below Advest - Stock Portfolio/Money Market		x								x								x							
DC	Kemper High Yield Fund		x								x							x								Gift Grandmother
S	Cubic Corp - Common Stock		x								x							Total included in advest above								x
S	Genuine Parts - Common Stock		x								x								"		"		"		"	
S	Longs Drug Stores - Common Stock		x								x								"		"		"		"	
S	Nashua Corp - Common Stock		x								x								"		"		"		"	
DC	Chiquita Brands - Common Stock		x								x								"		"		"		"	x
DC	NCH Corp - Common Stock		x								x								"		"		"		"	

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Machtley

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Shering-Plough - Common Stock		x															Total included in advest above									x
DC	Tenneco - Common Stock		x																"		"		"		"		x
DC	U.S. Gov't. Sec. Inc. GNMA Bond	x																	"		"		"		"		
S	Agreement - Sale of Law Practice				x												Install-ment sale					x					
DC	Boeing - Common Stock		x								x							Total included in advest account									x
DC	Dupont - Common Stock		x								x								"		"		"		"		x
DC	Federal Signal Corp - Common Stock		x								x								"		"		"		"		
DC	Humanna - Common Stock		x								x								"		"		"		"		x

Reporting Individual's Name: Machtley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	114 Touro Street, Newport, RI (½ ownership) = valuation		x		05/02/90				x			
S	New England Cash Money Market Account - Liquidated				03/03/90	x						
S	Tandy Corp - Common Stock		x		09/20/90	x						
DC	Crompton & Knowles - Common Stock		x		03/27/90	x						
DC	Bowl America - Common Stock		x		09/20/90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
S	Bank of Newport (½ ownership) = valuation	Mortgage on Paid 5-2-90 114 Touro Street, Newport, R.I.			x				
JT	Bank of Newport	Mortgage on 313, 315, 317 Wolcott Avenue,							
		Middletown, R.I.			x				
JT	Bank of Newport (½ownership) = valuation	Mortgage on 119 Wampanoag Drive,							
		Portsmouth, R.I.			x				

Reporting Individual's Name: Machtley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Alcan Aluminum - Common Stock		x		11/12/90	x						
DC	Varlen - Common Stock		x		07/12/90	x						
DC	Figgie International - Common Stock		x		09/20/90	x						
DC	Whitman Corp - Common Stock		x		09/20/90	x						
S	Cubic Corp - Common Stock	x			09/20/90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name: Machtley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Chiquita Corp - Common Stock	x			07/12/90	x						
DC	Shering-Plough - Common Stock	x			09/20/90	x						
DC	Tenneco - Common Stock	x			09/20/90	x						
DC	Boeing - Common Stock	x			09/20/90	x						
DC	Dupont - Common Stock	x			03/23/90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name: Machtley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Humanna - Common Stock	X			09/20/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 162 Main St. Dover, Del.				X			

Reporting Individual's Name
Machtley

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Machtley

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
	see attached

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
01/01/89	R.K. Machtley - Sayer & Regan Attorneys at Law	Sale of Law Practice

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [x] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [x] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Kenneth R. Machtley	05/14/91

GPO: 1991 37-598 (m)

RONALD K. MACHTLEY
1ST DISTRICT, RHODE ISLAND

COMMITTEE ON ARMED SERVICES
COMMITTEE ON SMALL BUSINESS
COMMITTEE ON GOVERNMENT OPERATIONS
SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

CO-CHAIR, NEW ENGLAND ENERGY CAUCUS
ENVIRONMENTAL AND ENERGY STUDY CONFERENCE
CONGRESSIONAL HUMAN RIGHTS CAUCUS
CONGRESSIONAL TEXTILE CAUCUS
CONGRESSIONAL CAUCUS ON WOMEN'S ISSUES
CONGRESSIONAL NOTCH COALITION

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
112 ANNEX HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4911

1ST DISTRICT OFFICES

STATE TOLL FREE NUMBER
1-800-562-9994

200 MAIN STREET
SUITE 230
PAWTUCKET, RI 02860
(401) 725-9400

127 SOCIAL STREET
ROOM 112
WOONSOCKET, RI 02895
(401) 762-4052

32 THAMES STREET
ROOM 267
NEWPORT, RI 02840
(401) 848-7920

Attachment

Advisory board member, National Republican Coalition for Choice

Advisory board member, Republicans for Choice

Honorary advisory board member, Women's Center of Rhode Island

Honorary advisory board member, Conanicut Island Chamber Music Festival

Board member, Rhode Island Scenic America

Member, Public Policy Advisory Committee Population Institute

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

RONALD K MACHTLEY
1ST DISTRICT RHODE ISLAND

COMMITTEE ON ARMED SERVICES
COMMITTEE ON SMALL BUSINESS
COMMITTEE ON GOVERNMENT OPERATIONS
SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

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CONGRESSIONAL CAUCUS ON WOMEN'S ISSUES
CONGRESSIONAL NOTCH COALITION

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
132 CANNON HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-4911

1ST DISTRICT OFFICES
STATE TOLL FREE NUMBER
1-800-562-9994

200 MAIN STREET
SUITE 230
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(401) 725-9400

127 SOCIAL STREET
ROOM 172
WOONSOCKET RI 02895
(401) 762 4052

320 THAMES STREET
ROOM 267
NEWPORT RI 02840
(401) 848 7920

June 17, 1991

HAND DELIVERED

12

MC

The Honorable Louis Stokes
Chairman
Committee on Standards of Official Conduct
The Capitol, HT-2
Washington, D.C., 20515-6328

Dear Chairman Stokes:

Enclosed is my amended Financial Disclosure Statement for 1990.

I inadvertently omitted receiving a gift from General Motors. The gift was the nine volume video series, entitled The Civil War.

With kindest personal regards,

Sincerely,

Ron Machtley
Member of Congress

RKM:ram
Enclosures

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RJ JUN 19 AM 9 52

U.S. House of Reps

HAND DELIVERED

(Office Use Only)

Ronald K. Machtley
(Full Name)

62 Sigourney Road
(Mailing Address)

Portsmouth, Rhode Island 02871

Filer Status	[x] Member of the U.S. House of Representatives — State: R.I. District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[x] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [x]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

Machtley

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	114 Touro Street, Newport, Rhode Island						X					X															
	(½ owner of total value)						X					X							X								X 05/02/91
JT	313, 315, 317 Wolcott Avenue,																										
	Middletown, Rhode Island					X						X										X					
JT	119 Wampanoag Drive, Portsmouth,																										
	Rhode Island (½ owner)					X						X										X					

For additional assets and unearned income, use next page.

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Reporting Individual's Name: Machtley

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income													BLOCK D
		Category of Value (X)										Type of Income (X)							Category of Amount of Income (X)										
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Navy Federal Credit Union		x										x					x									
JT	Promisory Note - 114 Touro Street, Newport, Rhode Island (Sale)				x								x								x						
JT	Shearson Lehman		x								x		x						x								
S	Stocks listed below Advest - Stock Portfolio/Money Market		x								x		x						x								
JT	Savings Account, Bank of Newport		x										x					x									
DC	Stocks listed below Advest - Stock Portfolio/Money Market		x								x								x								
DC	Stocks listed below Advest - Stock Portfolio/Money Market		x								x								x								
DC	Kemper High Yield Fund		x								x							x									Gift Grandmother
S	Cubic Corp - Common Stock		x								x							Total included in advest above									x
S	Genuine Parts - Common Stock		x								x								"		"		"		"		
S	Longs Drug Stores - Common Stock		x								x								"		"		"		"		
S	Nashua Corp - Common Stock		x								x								"		"		"		"		
DC	Chiquita Brands - Common Stock		x								x								"		"		"		"		x
DC	NCH Corp - Common Stock		x								x								"		"		"		"		

Reporting Individual's Name: Machtley

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Shering-Plough - Common Stock		x															Total included in advest above									x
DC	Tenneco - Common Stock		x															"		"		"		"			x
DC	U.S. Gov't. Sec. Inc. GNMA Bond	x																"		"		"		"			
S	Agreement - Sale of Law Practice				x												Install-ment sale				x						
DC	Boeing - Common Stock		x								x							Total included in advest account									x
DC	Dupont - Common Stock		x								x							"		"		"		"			x
DC	Federal Signal Corp - Common Stock		x								x							"		"		"		"			
DC	Humarna - Common Stock		x								x							"		"		"		"			x

Reporting Individual's Name: Machtley

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	114 Touro Street, Newport, RI (½ ownership) = valuation		X		05/02/90				X			
S	New England Cash Money Market Account - Liquidated				03/03/90	X						
S	Tandy Corp - Common Stock		X		09/20/90	X						
DC	Crompton & Knowles - Common Stock		X		03/27/90	X						
DC	Bowl America - Common Stock		X		09/20/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 162 Main St. Dover, Del.				X			
S	Bank of Newport (½ ownership) = valuation	Mortgage on 114 Touro Street, Newport, R.I.			X				
JT	Bank of Newport	Mortgage on 313, 315, 317 Wolcott Avenue,							
		Middletown, R.I.			X				
JT	Bank of Newport (½ ownership) = valuation	Mortgage on 119 Wampanoag Drive,							
		Portsmouth, R.I.			X				

Reporting Individual's Name

M: .ley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Alcan Aluminum - Common Stock		X		11/12/90	X						
DC	Varlen - Common Stock		X		07/12/90	X						
DC	Figgie International - Common Stock		X		09/20/90	X						
DC	Whitman Corp - Common Stock		X		09/20/90	X						
S	Cubic Corp - Common Stock	X			09/20/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name: Machtley

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Chiquita Corp - Common Stock	X			07/12/90	X						
DC	Shering-Plough - Common Stock	X			09/20/90	X						
DC	Tenneco - Common Stock	X			09/20/90	X						
DC	Boeing - Common Stock	X			09/20/90	X						
DC	Dupont - Common Stock	X			03/23/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name: Machtley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Humanna - Common Stock	X			09/20/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Machtley

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corporation	Nine Volume Video Series, The Civil War	$300.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☒

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Machtley

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
	See attached

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
01/01/89	R.K. Machtley - Sayer & Regan Attorneys at Law	Sale of Law Practice

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ken Machtley	06/17/91

GPO: 1991 37-598 (m)

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RONALD K MACHTLEY
1ST DISTRICT RHODE ISLAND

COMMITTEE ON ARMED SERVICES
COMMITTEE ON SMALL BUSINESS
COMMITTEE ON GOVERNMENT OPERATIONS
SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

CO-CHAIR NEW ENGLAND ENERGY CAUCUS
ENVIRONMENTAL AND ENERGY STUDY CONFERENCE
CONGRESSIONAL HUMAN RIGHTS CAUCUS
CONGRESSIONAL TEXTILE CAUCUS
CONGRESSIONAL CAUCUS ON WOMEN'S ISSUES
CONGRESSIONAL NOTCH COALITION

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
132 CANNON HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-4911

1ST DISTRICT OFFICES

STATE TOLL FREE NUMBER
1-800-982-9994

200 MAIN STREET
SUITE 230
PAWTUCKET RI 02860
(401) 725-9400

127 SOCIAL STREET
ROOM 172
WOONSOCKET RI 02895
(401) 762-4052

320 THAMES STREET
ROOM 287
NEWPORT RI 02840
(401) 846-7920

Advisory board member, National Republican Coalition for Choice

Advisory board member, Republicans for Choice

Honorary advisory board member, Women's Center of Rhode Island

Honorary advisory board member, Conanicut Island Chamber Music Festival

Board member, Rhode Island Scenic America

Member, Public Policy Advisory Committee Population Institute

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 4:52
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Thomas J. Manton
(Full Name)

331 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: N.Y. District: 9	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Private Duty Nursing - Greater NY Nursing Service,P.C.	Spousal Earnings	$4706	
	Tobacco Institute (1/20/90)	Honorarium	$2000	
	British Petroleum of America, Inc. (2/6/90)	Honorarium	$2000	
	RJR Nabisco (02/14/90)	Honorarium	$2000	
	AFL-CIO - Maritime Trades Dept (02/15/90)	Honorarium	$1500	
	MEBA 2 (02/17/90)	Honorarium	$2000	
	Iron Workers (02/19/90)	Honorarium	$2000	
	Sony Music Entertainment, Inc. (02/26/90)	Honorarium	$1000	
	Anheuser-Busch (03/06/90)	Honorarium	$2000	
	U.S. Tobacco (03/10/90)	Honorarium	$2000	

For additional earned income, use next page

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Reporting Individual's Name

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Pfizer, Inc. (03/17/90)	Honorarium	$1000	
Public Securities Assoc (04/02/90)	Honorarium	$2000	
Washington Caucus (04/04/90)	Honorarium	$ 500	
Citicorp (04/20/90)	Honorarium	$2000	
National Cable TV Assoc (05/20/90)	Honorarium	$2000	
Bergner, Boyette & Bockorny Inc (Nat'l Issues Forum) (05/23/90)	Honorarium	$1000	
Telecommunications Industry Assoc (05/23/90)	Honorarium	$1000	
CAP - 12 (06/14/90)	Honorarium	$ 500	
Motion Picture Assoc (06/20/90)	Honorarium	$1000	X
R. Duffy Wall & Assoc (06/26/90)	Honorarium	$1500	X
Fox Inc (06/21/90)	Honorarium	$1000	X
A.I.G. (06/29/90)	Honorarium	$2000	X
Distilled Spirits Council (07/20/90)	Honorarium	$1000	X
Equitable Life (08/17/90)	Honorarium	$2000	X
National Assoc of Broadcasters (09/27/90)	Honorarium	$1000	X
INGAA Foundation Inc. (11/17/90)	Honorarium	$2000	X
Securities Industry Assoc (11/20/90)	Honorarium	$2000	X
Chicago Board of Trade (12/07/90)	Honorarium	$ 750	X
Chicago Mercantile Exchange (12/07/90)	Honorarium	$ 750	X
St. Francis College (11/19/90)	Honorarium	$ 150	X

Reporting Individual's Name

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash. Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
S	D. Manton Trust (spouse)					X					X		X						X			X					
	N.Y.C. Employees Retirement System					X											Pension					X					
	Citibank	X											X					X									
	Congressional F.C.U.	X											X					X									
JT	47-17 43 Ave., Sunnyside, Ny (½ Interest)					X						X									X						
JT	19-14 21 Rd., Astoria, NY (Residence)						X											X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Berkely Coop. Towers, Sec.3-Stock in Coop.Apt.					x						x						x								
	Thomas J. Manton, P.C. - Pension Plan			x									x								x					
	Thomas J. Manton, P.C. - Profit Sharing Plan			x									x								x					
S	Home Savings Bank - IRA		x										x					x								

Reporting Individual's Name

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Citibank	Coop Apt. Mortgage 39-65 52 St.	x						
JT	L.I. Savings Bank	Mortgage (½) on 47-17 43 Ave.				x			
JT	Dime Savings Bank	Mortgage on 19-14 21st St, Astoria				x			
	Wright Patman F.C.U.	Personal Loan	x						
	Thomas J. Manton, P.C.	Personal Loan		x					

Reporting Individual's Name

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Public Television	Civil War Tapes	$200

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Tobacco Institute (SPEECH)	Jan. 18-21,'90	Roundtrip Air Travel from N.Y.C. to Palm Springs,CA,3 days food/lodg	
AFL-CIO - Maritime Trades Dept	Feb. 14-19,'90	Roundtrip Air Travel From D.C. to Miami, Fla. (SPEECH)	
Iron Workers International (SPEECH)	Feb. 14-17,'90	3 days for lodging and food	
U.S. Tobacco - (PANELIST)	Mar. 9-11, '90	Roundtrip Air Travel from NYC to W.Palm Beach, Fla.2 days Food/Lodging	
National Cable Television Assoc.	May 20, 1990	Roundtrip Air Travel from NYC to New Orleans (PANELIST)	
INGAA Foundation Inc. (SPEECH)	Nov. 16-17,'90	Roundtrip Air Travel from NYC to Orlando, Fla. 1 day food & lodging	
Securities Industry Assoc. (PANELIST)	Nov. 29-30,'90	Roundtrip Air Travel from NYC to W. Palm Beach, FLa.1day food/lodging	
Chicago Board of Trade (FACT-FINDING)	Dec. 7, 1990	Roundtrip Air Travel from NYC to Chicago, ILL.	
Chicago Mercantile Exchange "	Dec. 7, 1990	Roundtrip Air Travel from NYC to Chicago, ILL	
Red Apple Group (SPEECH, FACT-FINDING)	Dec. 7-9,1990	Roundtrip Air Travel from Teterboro,NJ to Belgrade,YUGO.,2days food/lodg	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C 7342)

Reporting Individual's Name

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Sole Stockholder, Director, Officer	Thomas J. Manton, P.C.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE X

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No X NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No X NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Thomas J Manton	MAY 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 23 PM 4:51

HAND DELIVERED
MC
(Office Use Only)

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Thomas J. Manton
(Full Name)

331 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: N.Y. District: 9	[X] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[x] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Private Duty Nursing - Greater NY Nursing Service,P.C.	Spousal Earnings	$4706	
	Tobacco Institute (01/20/90	Honorarium	$2000	
	British Petroleum of America, Inc. (02/06/90)	Honorarium	$2000	
	RJR Nabisco (02/14/90)	Honorarium	$2000	
	AFL-CIO - Maritime Trades Dept (02/15/90)	Honorarium	$1500	
	MEBA 2 (02/17/90)	Honorarium	$2000	
	Iron Workers (02/17/90)	Honorarium	$2000	
	Sony Music Entertainment, Inc. (02/26/90)	Honorarium	$1000	
	Anheuser-Busch (03/06/90)	Honorarium	$2000	
	U.S. Tobacco (03/10/90)	Honorarium	$2000	

For additional earned income, use next page

Reporting Individual's Name

Thomas J. Manton

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Pfizer, Inc. (03/17/90)	Honorarium	$1000	
Public Securities Assoc (04/02/90)	Honorarium	$2000	
Washington Caucus (04/04/90)	Honorarium	$ 500	
Citicorp (04/20/90)	Honorarium	$2000	
National Cable TV Assoc (05/20/90)	Honorarium	$2000	
Bergner, Boyette & Bockorny Inc. (Nat'l Issues Forum) (05/23/90)	Honorarium	$1000	
Telecommunications Industry Assoc (05/23/90)	Honorarium	$1000	
CAP - 12 (06/14/90)	Honorarium	$ 500	
Motion Picture Assoc (06/20/90)	Honorarium	$1000	x
R. Duffy Wall & Assoc (06/26/90)	Honorarium	$1500	x
Fox Inc (06/21/90)	Honorarium	$1000	x
A.I.G. (06/29/90)	Honorarium	$2000	x
Distilled Spirits Council (07/20/90)	Honorarium	$1000	x
Equitable Life (08/17/90)	Honorarium	$2000	x
National Assoc of Broadcasters (09/27/90)	Honorarium	$1000	x
INGAA Foundation Inc. (11/17/90)	Honorarium	$2000	x
Securities Industry Assoc (11/20/90)	Honorarium	$2000	x
Chicago Board of Trade (12/07/90)	Honorarium	$ 750	x
Chicago Mercantile Exchange (12/07/90)	Honorarium	$ 750	x
St. Francis College (11/19/90)	Honorarium	$ 150	x

Reporting Individual's Name

Thomas J. Manton

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash Credit Union Accounts			X									X									X				
	182 Main Street, Dover, Delaware				X							X								X						
	Thomas J. Manton, P.C. - stock in Professional Loan Corp.			x							x							x								
	N.Y.C. Employees Retirement System					x											Pension					x				
	Citibank	x											x					x								
	Congressional F.C.U.	x											x					x								
JT	47-17 43 Ave.,Sunnyside,NY(½ interest)					x						x										x				
JT	19-14 21 Rd.,Astoria,NY (Residence)						x											x								

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Thomas J. Manton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Berkely Coop. towers,Sec.3-Stock in 39-65 52 St.,Woodside Apt.-Coop. Apt.					x						x						x									
	Thomas J. Manton,P.C. - Pension Plan			x									x								x						
	Thomas J. Manton, P.C.- Profit Sharing Plan			x									x								x						
S	Home Savings Bank - IRA		x										x					x									
S	D. Manton Trust (Spouse)-Inter vivos					x					x								x								
	Trust established in 1959 with												x									x					
	Citibank,N.A. as trustee, with the																										
	Corpus being 5481 units of Citibank																										
	Balanced Fund, a fund consisting of																										
	Treasury Securities, Common Stocks,																										
	Bonds Convertible Preferred Stocks																										
	and Convertible Bonds.																										

Reporting Individual's Name
Thomas J. Manton

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [x]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	Citibank	Coop Apt.Mortgage 39-65 52 St.	x						
JT	L.I. Savings Bank	Mortgage (½) on 47-17 43 Ave.				x			
JT	Dime Savings Bank	Mortgage on 19-14 21st St.,Astoria				x			
	Wright Patman F.C.U.	Personal Loan	x						
	Thomas J. Manton, P.C.	personal Loan		x					

Reporting Individual's Name
Thomas J. Manton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Public Television	Civil War Tapes	$200

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Tobacco Institute (Speech)	1/18-1/21'90	Roundtrip Air Travel from N.Y.C. to Palm Springs,CA,3 days food/lodge	
AFL-CIO - Maritime Trades Dept.	2/15/90	Roundtrip Air Travel from D.C. to Miami, Fla. (Speech)	
Iron Workers International (Speech)	2/14-2/17'90	3 days for lodging and food	
U.S. Tobacco - (Panelist)	3/9-3/11'90	Roundtrip Air Fare from N.Y.C. to W.Palm Beach,Fla.2 days food/lodge	
National Cable Television Assoc	5/20/90	Roundtrip Air Fare from NYC to New Orleans (Panelist)	
INGAA Foundation Inc.(Speech)	11/16-11/17'90	Roundtrip Air Fare from NYC to Orlando,Fla. 1 day food/lodging	
Securities Industry Assoc.(Panelist)	11/29-11/30'90	Roundtrip Air Fare from NYC to W.Palm Beach,Fla. 1 day food/lodging	
Chicago Board of Trade (fact-finding)	12/7/90	Roundtrip Air Fare from NYC to Chicago, Ill.	
Chicago Mercantile Exchange(fact-finding)	12/7/90	Roundtrip Air Fare from NYC to Chicago, ILL.	
Red Apple Group (Speech,Fact-finding)	12/7-12/9'90	Roundtrip Air Fare from Teteboro,NJ to Belgrade.YUGO.,2days food/lodg	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C. 7342)

Reporting Individual's Name: Thomas J. Manton

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Sole Stockholder, Director, Officer	Thomas J. Manton

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Thomas J. Manton	MAY 23, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:49
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only) 6

Edward J. Markey
(Full Name)

2133 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Mass. District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash , D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
National Institute of Mental Health	Spouse Salary	NA	
Spouse: Private Practice of Medicine	Fees	NA	
Consulting	Fees	NA	
Lifetime Medical, NJ (approx. Mar. 31, 1990)	Appearance	350.	
Sheppard & Pratt Psych. Hosp., MD(Apr.15, 1990)	Lecture	750.	
Southern Medical Society, FL (June 18, 1990)	Lecture	800.	
Nebraska Psychiatric Society (Aug. 12, 1990)	Lecture	1,500.	
William Hall Psych. Inst. (Nov. 26, 1990)	Lecture	500.	

For additional earned income, use next page

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Reporting Individual's Name

Edward J. Markey

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																		Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Cong. Federal Credit Union Acct.				X								X								X						
	Bank for Savings, Malden, MA			X									X							X							
	Shearson Lehman Bros., I.R.A.		X								X								X								
S	Dominion Bank, Wash. DC			X									X							X							
S	Merrill Lynch, I.R.A.		X								X							X									
S	TIAA College Retirement Equity Fnd.				X								X											X			

For additional assets and unearned income, use next page

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Reporting Individual's Name

Edward J. Markey

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Cong. Federal Credit Union	Line of Credit	X						

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Reporting Individual's Name
Edward J. Markey

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
New York Stock Exchange Fact Finding	Jan. 4	Round-trip air from D.C. - NYC	
Duke University - Lecture	Mar.3-5	Round-trip air from D.C. - Raleigh-Durham, NC, 2 nights lodging + food	
Futures Industry Assoc.-Speech	Mar.9-10	Round-trip air from D.C. - Ft. Lauderdale, 1 night lodging +food	
Aspen Institute Conference Participant	April 11-15	Round-trip air from D.C. to Hamilton, BM, 4 nights (spouse paid own air fare) lodging + food	
National Cable Television Assoc. Speech	May 19-20	Round-trip air from D.C. - Atlanta, GA, 1 night lodging, gr. transp.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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PART VII -- "REIMBURSEMENTS" (cont.)

SOURCE	DATES	BRIEF DESCRIPTION (ITINERARY AND NATURE OF EXPENSES)
Business Week - Speech	June 4-5	Round-trip air from D.C. to NYC, 1 night lodging, gr. transp.
ADL Boston Leadership Mission - Speech	Aug.25-Sept.2	Round-trip air from D.C. to Israel, 7 nights lodging, gr. transp, food (with spouse)
Securities Industry Assoc. - Speech	Nov. 29-Dec.1	Air fare from Palm Springs, CA to Ft. Lauderdale, FL to D.C. 2 nights lodging + food, gr. transp.

Reporting Individual's Name
Edward J. Markey

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "~~Qualified Blind Trust" or~~ other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [X] No [ ] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Edward J. Markey	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10:45
U.S. HOUSE OF REPRESENTATIVES

Ronald Charles Marlenee
(Full Name)

2465 Rayburn H.O.B.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Montana District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

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MC (Office Use Only)
8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)		Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)		Article	$500	X
	ABC Corporation		Director's Fee	$6,000	
	Fairfax County Board of Education		Spouse Salary	NA	
	Inter Mountain Forest Ind., Coeur D'Alene, ID	1/15/90	Speech	500.00	
	Chevron, California	2/09/90	Speech	1,000.00	
	ARCO, L.A. CA	2/09/90	Speech	2,000.00	
	Kennecott; Salt Lake, UT	2/16/90	Speech	1,500.00	
	Gun Owners of California; Sacramento, CA	3/19/90	Speech	1,000.00	
	Broadwell Corp.; Torrance, CA	2/10/90	Speech	2,000.00	
	Gallatin Co. Republican Central Comm.; Bzn., MT	3/14/90	Speech	300.00	
	National Park Concessioners, Washington, D.C	3/16/90	Speech	1,000.00	
	ASARCO; N.Y.	3/02/90	Speech	1,000.00	
	National Agricultural Chem. Assoc.; Wash., D.C.	4/06/90	Speech	500.00	

For additional earned income, use next page

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Reporting Individual's Name

Ronald Charles Marlenee

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
ConAgra; Omaha, NE	5/17/90	Speech	2,000.00	X 1,000 to Billings Rescue Mission
Spreckles Ind. (sugar); Pleasanton, CA	5/21/90	Speech	500.00	
California Beet Growers; Stockton, CA	5/21/90	Speech	500.00	
Holly Sugar; Emeryville, CA	7/02/90	Speech	1,000.00	
NOPA: Washington, D.C.	7/02/90	Speech	1,000.00	
Environmental Eng. & Service Corp.; Denver, CO	8/15/90	Speech	1,500.00	
International Assoc. of Drilling Cont.; Houston,TX	8/22/90	Speech	1,000.00	
ORYX Energy; Texas	8/27/90	Speech	250.00	
Bollinger Machine & Ship Yards; Lockport, LA	9/12/90	Speech	1,000.00	
Tenneco; Houston, TX	8/22/90	Speech	2,000.00	
National Ocean Ind. Assoc.; Washington, D.C.	7/18/90	Speech	2,000.00	
National Council of Farmers Assoc.; Wash., D.C	7/12/90	Speech	1,000.00	
National Forest Products Assoc.; Wash., D.C.	8/20/90	Speech	250.00	
ABCOM; Fairfax, VA	9/19/90	Speech	500.00	
Meyers & Assoc.; Washington, D.C.	10/01/90	Speech	1,000.00	
National Ag. Chem. Assoc.; Washington, D.C.	10/30/90	Speech	500.00	
Bell Helicopter; Fort Worth, TX	11/27/90	Speech	2,000.00	X 1,250 to Emmanuel Baptist Church, Bigs.
Rhone-Poulenc Ag. Co.; Washington, D.C.	11/29/90	Speech	250.00	

Reporting Individual's Name
Ronald Charles Marlenee

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Marlenee Big Sky Farms & Ranch							X																			
	1) Misc. Royalties - Oil	X										X						X									
	2) Marlenee Big Sky Farms & Ranch			X								X											X				
	3) Farmland/500 acres/Daniels Co.				X																						X
	Montana National Bank - CD		X										X						X								cashed in-12/90
	New York Life Insurance		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ronald Charles Marlenee

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Cabin & Lot 15; Bridger Pines; Bzn,MT					X																				
JT	Lot 8; Tuscon, Arizona			X																						

Reporting Individual's Name

Ronald Charles Marlenee

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Farmland/500 acres/Daniels Co., Montana	X			1/90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
JT	Federal Land Bank - Sidney, MT	Note on Farmland				X			
	Montana National Bank - Plentywood, MT	Farm Operation & Personal				X			
	Pete Hagefeldt (land purchase) - Scobey, MT	Farmland		X					

Reporting Individual's Name
Ronald Charles Marlenee

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
None		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
National Oilseed Processors Assoc.	June 23-25	Roundtrip Air from D.C. to Pebble Beach; 3 days food & lodging; Self & Spouse	
Safari Club Int.	Feb 1,2,3	Roundtrip Air from MT to Reno; 3 days food & lodging; Self & Spouse	
NACA	Sept 28 & 29	Food & lodging; Self & Spouse	
ARCO	Feb 9-10	Roundtrip from D.C. to L.A.; lodging; self	
Nat'l Ocean Ind. Assoc.	Jul 13-14	Air Travel DC to Seattle to Billings; 1 day lodging & food; self	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Ronald Charles Marlenee

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Continuation Sheet

Source	Date(s)	Description
Bell Helicopter	Nov 8-9	Roundtrip Air Bozeman to San Antonio to Dallas to Bozeman; 2 days food & lodging; self
Texaco	Aug 20-23	Roundtrip Air Bozeman to New Orleans; 2 days lodging & food; self
Environmental Eng. & Serv. Corp.	Aug 22-23	Roundtrip Air New Orleans to Houston; food; self

Reporting Individual's Name
Ronald Charles Marlenee

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Marlenee Big Sky Farms & Ranch
Director at Large	Safari Club International

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE X

Date	Parties To	Terms of Agreement
	None	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No X NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No X NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ron Marlenee	5/8/91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 PM 2 06
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

David D'B. Martin
(Full Name)

442 Cannon House Office Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: New York District: 26	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	St. Lawrence-Lewis Board of Cooperative Educational Services	Spouse Salary	NA	
	Key Bank of Central New York (see Part VIII-Positions)	Director's Fees	$5,400	
	Hercules, Incorporated (5/11/90)	Speech	$1,000	
	National Soft Drink Association (6/11/90)	Speech	$2,000	
	The Boeing Company (8/10/90)	Speech	$2,000	
	South Metro Denver Chamber of Commerce (9/17/90)	Speech	$1,000	
	The Tobacco Institute (9/25/90)	Speech	$2,000	
	Bell Helicopter Textron (12/13/90)	Speech	$2,000	
	LTV Aerospace (12/7/90)	Speech	$2,000	
	Continental Maritime of San Diego, Inc. (12/14/90)	Speech	$1,000	

For additional earned income, use next page

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Reporting Individual's Name
David O'B. Martin

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Cubic Defense Systems (12/14/90)	Speech	$1,000	
Avco Systems Textron (12/19/90)	Speech	$1,000	
General Atomics (12/21/90)	Speech	$1,000	

Reporting Individual's Name

David O'B. Martin

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	Examples: George Wash. Credit Union Accounts			X									X								X						
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	Key Corp Stock		X								X							X									X
	Key Bank of Central New York Savings Accounts & Key Advantage Accounts		X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name
David O'B. Martin

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Key Corp Stock		X		12/15/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Key Bank of Central New York	Loans	X						

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Reporting Individual's Name
David O'B. Martin

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corp.	Videotape documentary series "The Civil War"	$120

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hercules, Incorporated	April 1-2, 1990	Round-trip air travel from Washington, D.C. to Salt Lake City, Utah, together with overnight lodging and meals	
The Boeing Company	Aug. 8, 1990	Round-trip rail travel Washington, D.C. to Philadelphia, PA together with meals	
6th Cong. District of Colorado Cong. Forum	Aug. 30-31, 1990	Round-trip air travel from Syracuse, N.Y. to Denver, Colorado, together with one day's food and lodging	
LTV Aerospace	Nov. 29-30, 1990	Round-trip air travel from Washington, D.C. to Fort Worth, Texas, together with overnight lodging and meals	
Avco Systems Textron	Dec. 20, 1990	Round-trip air travel from Washington, D.C. to Wilmington, Massachusetts, together with lunch	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
David O'B. Martin

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Barry M. Goldwater Scholarship and Excellence in Education Foundation
Member, Board of Directors	Key Bank of Central New York - resigned 12/31/90
Trustee	Agati Laborers' Local 322 Scholarship Fund - resigned 12/31/90

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
David O'B Martin	May 15, 1991

GPO 1991 37-598 (m)

2607

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 PM 2:47
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MATTHEW GILBERT MARTINEZ, JR.
(Full Name)

1080 Wisconsin Avenue, #2020
(Mailing Address)

Washington, D.C. 20007

Filer Status	XX Member of the U.S. House of Representatives	State: Calif District: 30	☐ Officer or Employee — Employing Office:
Report Type	XX Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

MC (Office Use Only) 6

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In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE ☐

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
Editorial Projects in Education Teacher Magazine Wash. D.C. (3-19-90)	Article	$150.00	
National Restaurant Association 1200 17th Street, N.W. Washington, D.C. 20036 (5-18-90)	Honoraria/Speech	$1,000.00	
National Association of JTPA Auditors 2238 Iroquois Ft. Collins, CO 80525 (6-1-90)	Honoraria/Speech	$1,000.00	

For additional earned income, use next page

Reporting Individual's Name

Matthew G. Martinez, Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National School Boards Association 1680 Duke Street Alexandria, VA 22314 (10-16-90)	Honoraria/Speech	$1,000.00	
Foodservice & Lodging Institute 1919 Pennsylvania Avenue, N.W. #504 Washington, D.C. 20006 (10-23-90)	Honoraria/Speech	$500.00	
TELACU Industries, Inc. 5400 E. Olympic Blvd. #300 Los Angeles, CA 90022 (11-20-90)	Honoraria/Speech	$2,000.00	

Reporting Individual's Name
Matthew G. Martinez, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X									X					
	182 Main Street, Dover, Delaware				X							X								X							
JT	439 S. New Ave.;Monterey Park,CA						X					X											X				
JT	3514 Beverly Boulevard Montebello, CA 90640						X					X											X				
JT	1st Trust Deed 444 Garvey;Monterey Park,CA					X							X									X					
	1080 Wisconsin Avenue, #2020 Washington, D.C. 20007					X												X									X
	300 M. Street, S.W. #N102 Washington, D.C. 20024				X													X									

For additional assets and unearned income, use next page

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Reporting Individual's Name

Matthew G. Martinez, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	1080 Wisconsin Avenue, #2020; Wash. D.C. 20007	x			6-28-90				x			

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Perpetual Mortgage Co.; Alex. VA	Mortgage on 1080 Wisconsin				x			
	Monterey Park Savings & Loan Monterey Park, CA	Morgage on 439 S. New Avenue				x			
	Sovran Mortgage Richmond, VA	Mortgage on 300 M. Street		x					

2611

Reporting Individual's Name

Matthew G. Martinez, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see instructions, page 18.

NONE [XX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
National Restaurant Assn.	5-18-90	Round trip airfare from D.C. to Chicago; 2 days food and lodging; self.	
National Assn. of JTPA Auds.	6-1-90	Round trip airfare from D.C. to Atlanta; self.	
Chevron USA, Incorporated	8-6-90	Round trip airfare from D.D. to Achorage; 5 days food and lodging; self.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

2612

Reporting Individual's Name
Matthew G. Martinea, Jr.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [XX]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [XX]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Matthew G. Martinea

DATE (Month, Day, Year): May 13, 1991

GPO 1991 31-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

ROBERT TAKEO MATSUI
(Full Name)
U. S. House of Representatives
2353 Rayburn House Office Building
(Mailing Address)
Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: CA, District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash , D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
National Fire Protection	Spouse Salary	$2,500	
Virginia Heart Surgery Associates	Spouse Salary	$1,800	
McClatchy Newspapers (1/17/90)	Honorarium	$ 150	
Pfizer (1/17/90)	Honorarium	$2,000	
Taiwan Medical Association (2/28/90)	Honorarium	$2,000	
Foley, Hoag & Eliot (1/31/90)	Honorarium	$2,000	
Pacific Mutual (1/31/90)	Honorarium	$2,000	
Security Pacific (1/31/90)	Honorarium	$1,500	
National Association of Realtors (2/7/90)	Honorarium	$1,000	
American Association of Equipment Lessors (2/20/90)	Honorarium	$1,200	

For additional earned income, use next page

Reporting Individual's Name

ROBERT TAKEO MATSUI

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
American International Group (3/5/90)	Honorarium	$2,000	
The Washington Tax Association (3/20/90)	Honorarium	$1,000	
FannieMae (3/20/90)	Honorarium	$2,000	
Dayton Hudson (3/30/90)	Honorarium	$1,000	
California Grocers Association (4/6/90)	Honorarium	$ 500	
Connell Rice & Sugar (4/18/90)	Honorarium	$2,000	
Shippers National Freight (4/25/90)	Honorarium	$2,000	
The Irvine Company (5/7/90)	Honorarium	$2,000	
American College of Emergency Physicians (5/29/90)	Honorarium	$2,000	
National Association of Independent Schools (6/18/90)	Honorarium	$ 750	
Asian American Unity Dinner Gala (6/26/90)	Honorarium	$2,000	
National Conference on Public Employee Retirement Systems (7/10/90)	Honorarium	$2,000	
American Electronics Association (6/18/90)	Honorarium	$1,000	
Affordable Housing Roundtable (8/9/90)	Honorarium	$ 500	
	TOTAL HONORARIA	$32,600	
	LESS CONTRIBUTIONS	5,750	
	TOTAL 1990 HONORARIA	$26,850	

Reporting Individual's Name

ROBERT TAKEO MATSUI

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman Federal Credit Union	x											x						x								
	Wright Patman Federal Credit Union held in trust for Brian R. Matsui		x										x					x									
S	Bank of Baltimore		x										x					x									
DC	Bank of Baltimore		x										x						x								
	American Savings Bank held in trust for Brian R. Matsui			x									x							x							

For additional assets and unearned income, use next page

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Reporting Individual's Name
ROBERT TAKEO MATSUI

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

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Reporting Individual's Name
ROBERT TAKEO MATSUI

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [x]

Example:	Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Pfizer		1/9/90	Roundtrip air travel from Sacramento to Irvine, California	
Foley, Hoag & Eliot		1/18/90	Roundtrip air travel from D.C. to Boston	
Taiwan Medical Association		1/27-28/90	Two nights lodging and meals, Los Angeles	
National Association of Realtors		2/2/90	Roundtrip air travel from D.C. to Los Angeles, one night lodging and meals, for self and spouse	
(SEE continuation sheet)				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Financial Disclosure Report of
ROBERT TAKEO MATSUI
Page A-4(a)

Part VII - Reimbursements and Gifts of Transportation, Lodging, Food, Entertainment

Source	Date	Description
Democratic Business Council	2/8-9/90	Airfare from D.C. to Tucson to Los Angeles, two nights lodging and meals
Visions for Keiro	2/10/90	One night lodging, Los Angeles
Santa Barbara JACL	2/18/90	Airfare San Francisco to Santa Barbara to D.C., one night lodging
AIPAC	3/4/90	Airfare San Francisco to Seattle to D.C., one night lodging and meals
The Connell Company	4/11/90	Roundtrip air travel from D.C. to New Jersey, two nights lodging and meals, for self and spouse
Shippers National Freight Claim Council, Inc.	3/31/90	Roundtrip air travel from D.C. to San Francisco
Japanese American Community Graduates Program	6/9/90	Roundtrip air travel from D.C. to Denver, one night lodging and meals
Asian American Unity Dinner	5/5/90	Roundtrip air travel from D.C. to Boston
DNC National Finance Council	6/15/90	Roundtrip air travel from D.C. to Santa Fe, New Mexico
Japanese American Citizens League	6/22/90	Roundtrip air travel from D.C. to San Diego
National Assn. of Real Estate Investment Trusts, Inc.	6/29/90	Roundtrip air travel from D.C. to San Francisco

Financial Disclosure Report of
ROBERT TAKEO MATSUI
Page A-4(b)

Democratic Cong. Campaign Cmte.	7/16/90	Airfare Los Angeles to D.C.
Anti-Defamation League of B'nai B'rith	9/6/90	Roundtrip air travel from D.C. to Providence, Rhode Island, one night lodging and meals
Good Housekeeping Magazine	11/14-19/90	Roundtrip air travel from D.C. to Moscow/USSR, lodging and meals for spouse

Reporting Individual's Name
ROBERT TAKEO MATSUI

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5)

Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert T. Matsui	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 17

HAND DELIVERED

Hon. Nicholas Mavroules
(Full Name)

2334 Rayburn Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State Mass. District 6	[ ] Officer or Employee	Employing Office.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [XX]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

Hon. Nicholas Mavroules

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	626 Lynnway Associates			X									X									X					
	Celtics Ltd. Partnership	X								See ~~Memo~~			X					X									
JT	First Colonial Bank	X											X					X									
JT	Bank of New England	X											X						X								
JT	First Colonial	X											X					X									
JT	Municipal Federal Credit Union	X									X							X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

Hon. Nicholas Mavroules

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																										
[redacted] Celtics Ltd. Partnership																										
Total Income was $ 3.00																										
$ 1.00 was Interest Income and																										
$ 2.00 was ordinary income from																										
Passive Activity.																										

Reporting Individual's Name

Hon. Nicholas Mavroules

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name

Hon. Nicholas Mavroules

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
United Technologies	Feb.9-13	Roundtrip Air from Boston to W. Palm	
	1990	Flight testing facility Tour	
		No Food or Lodging reimbursed	
Electronic Industries Assoc.	Apr. 10-16	Legislative Conference, Captiva Island, FL	
	1990	Roundtrip Air from Boston-Ft.Myer, FL	
		Three days food & lodging, self&spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

APR 6-8 + APR. 13 TRAVEL AT OWN EXPENSE

Reporting Individual's Name

Hon. Nicholas Mavroules

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	626 Lynnway Associates
Limited Partner	Celtics Ltd. Partnership

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☐ NA ☒

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Nicholas Mavroules	5-15-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 11:08

HAND DELIVERED

ROMANO L. MAZZOLI
(Full Name)

939 ARDMORE DRIVE
(Mailing Address)

LOUISVILLE, KENTUCKY 40217

Filer Status	[X] Member of the U.S. House of Representatives — State: KENTUCKY District: THIRD	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	ALEXANDRIA DRAFTING COMPANY	SPOUSE SALARY	$27,321.20	

For additional earned income, use next page

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Reporting Individual's Name
Romano L. Mazzoli

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
NONE	N/A	N/A	N/A

Reporting Individual's Name
Romano L. Mazzoli

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Congressional Federal Credit Union																										
	Account # 62976-0	X											X					X									
	Account # 62976-1		X										X						X								
S	Congressional Federal Credit Union																										
	Account # 84720-0		X										X						X								
	Account # 84720- 1		X										X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Romano L. Mazzoli

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Congressional Federal Credit Union																									
	Certificates of Deposit																									
	# 16541		X										X					X								
	# 20744		X										X					X								
	# 21128		X										X					X								
	Sergeant At Arms - House of Reps.																									
	# 5348		X								Not Applicable							X								
S	Republic Bank & Trust Co. #20-556-7	X											X					X								
S	The Cumberland																									
	# 01-000-001-00610155499	X											X					X								
JT	First Natl. Bank & Trust Co.																									
	# 427-5518-4		X										X					X								
	U.S. Savings Bonds Series E		X								Not Applicable							X								
S	Liberty Natl. Bank & Trust Co.																									
	CD # 010090063046		X										X						X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOM

Continuation Sheet (if needed)

Reporting Individual's Name: ANO L. MAZZOLI

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	U.S. Treasury Bills																										
	#912794WF7		X										X						X								
	#912794WH3		X										X						X								
	#912794VT8		X										X						X								
S	Liberty Natl. Bank & Trust Co.																										
	IRA #01527329			X									X							X							
	Liberty Natl. Bank & Trust Co.																										
	IRA 29-5081232			X									X						X								
	Civil Service Retirement System				X						Not Applicable							Not Applicable									
	Federal Employee Thrift																										
	Savings Plan (401-K)			X							Not Applicable							Not Applicable									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Romano L. Mazzoli

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	929 Parkway Drive																									
	Louisville, Kentucky 40217																									
	Single Family rental property																									
	County Assessed Value $44,660																									
	Less: Mortgage (Valla) 34,646		X									X								X						

Reporting Individual's Name
Romano L. Mazzoli

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Loan of $1900.00 to R. L. Mazzoli Campaign Fund				12/7/90	X						
	Loan repaid in full				2/1/91							

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Mrs. Brad Valla, 3774 Illinois Avenue	Mortgage; 929 Parkway Drive							
	Louisville, Kentucky 40217	Louisville, Kentucky 40217		X					

Reporting Individual's Name
Romano L. Mazzoli

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Bellarmine College Louisville, Kentucky	4/10/90 to 4/14/90	Roundtrip airfare, lodging & meals; trip to Poland with Bellarmine College's President to present Bellarmine Medal to Lech Walesa	
National Court Appointed Special Advocate Assn. (CASA)	4/28/90 to 4/30/90	Roundtrip airfare, lodging & meals; trip to New Orleans to address National CASA convention & receive its citizenship award.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Romano L. Mazzoli

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Spouse - Board of Directors	Ursuline Campus Schools, Louisville, Kentucky

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Romano L. Mazzoli

DATE (Month, Day, Year): May 14, 1991

GPO: 1991 37-5[illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 12 49

HAND DELIVERED

Janis L. Meyers
(Full Name)

8408 West 90th Street
(Mailing Address)

Overland Park, KS 66212

Filer Status	[X] Member of the U.S. House of Representatives	State: Kansas District: Third	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Capitol Federal	Spouse - Talent Fee		

For additional earned income, use next page

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Reporting Individual's Name

Janis L. Meyers

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Principal Mutual Life			X													Pension						X				
	Metcalf State Bank					X							X						X								
	Baxter Springs, KS - Bonds		X										X						X								
	Nueces Cnty., TX - Bonds		X										X						X								
	Jefferson Cnty., KY - Bonds		X										X						X								
	Southeastern OK Ind. Bonds		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Janis L. Meyers

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Gulf Coast Waste Dsp. Bonds		X										X						X								
	Johnson, KS - Bonds		X										X						X								
S	Burlington, KS - Bonds		X										X						X								
	Computer Science - Stock		X								X							X									
	NYNEX Corporation - Stock		X								X							X									
	Wal Mart Stores - Stock		X								X							X									
	Wyoming Land		X														Royalty	X									
S	American Cap - Mutual Fund		X								X							X									
	Sergant at Arms - Bank		X														Checking										
S	Carnegie Money Fund			X							X										X						
S	U.S. Treasury Bonds						X				X						IRA		X								
S	Agency Rent A Car - Stock		X								X						IRA										
S	Allied Materials - Stock			X							X						IRA										
S	Augat Incorporated - Stock		X								X						IRA	X									
S	Bristol Myers - Stock		X								X						IRA										

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Janis L. Meyers

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Freeport McMoran - Ptn.			X								X					IRA		X								
S	Johnson & Johnson - Stock		X								X						IRA	X									
S	Kemper Corp. - Stock		X								X						IRA	X									
S	Pacific Western - Stock		X								X						IRA										
S	UpJohn Company - Stock			X							X						IRA										
S	Carnegie Money Fund				X						X						IRA					X					

Reporting Individual's Name
Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Burlington, KS - Bonds	X			5/22/90		X					
	Wal Mart Stores - Stock		X		4/16/90	X						
S	U.S. Treasury Bonds	X			1/24/90					X		
S	U.S. Treasury Bonds	X			1/25/90			X				
S	Air Pdts. & Chemicals - Stock	X			2/12/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

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	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Agency Rent A Car - Stock	X			03/14/90		X					
S	Computer Assoc. Intl. - Stock	X			04/20/90		X					
S	Chiron Corp. - Stock	X			05/07/90		X					
S	Air Pdts. & Chemicals - Stock		X		05/21/90		X					
S	Intergraph Corp. - Stock	X			05/21/90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2642

Reporting Individual's Name

Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

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Example:	ABC Corporation Common Stock	X			10-12-90			X				
S	Kerr-McGee Corp. - Stock	X			05/30/90	X						
S	Computer Assoc. Intl. - Stock		X		06/07/90		X					
S	Chiron Corp. - Stock		X		06/13/90		X					
S	Puritan - Bennett Corp. - Stock	X			06/19/90		X					
S	Kerr-McGee Corp. - Stock		X		06/22/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Silicon Graphics - Stock	X			06/22/90		X					
S	Meredith Corp. - Stock		X		07/10/90		X					
S	Intergraph Corp. - Stock		X		07/13/90		X					
S	Silicon Graphics - Stock		X		07/24/90	X						
S	FPL Group - Stock	X			07/31/90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

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	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Augat Incorporated - Stock	X			08/10/90		X					
S	Avon Products - Stock	X			08/10/90		X					
S	Kemper Corp. - Stock	X			08/16/90		X					
S	Freeport McMoran - Partnership	X			08/23/90		X					
S	Kemper Corp. - Stock	X			08/24/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☒

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	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name: Janis L. Meyers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Avon Products - Stock		X		09/04/90	X						
S	Johnson & Johnson - Stock	X			10/30/90	X						
S	Schering Plough - Stock	X			10/30/90	X						
S	Bristol Meyers Squibb - Stock	X			10/31/90	X						
S	Schering Plough - Stock		X		11/01/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Janis L. Meyers

PART IV—TRANSACTIONS

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	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Puritain Bennett - Stock		X		12/10/90		X					
S	Applied Materials - Stock	X			12/17/90		X					
S	UpJohn Co. - Stock	X			12/31/90		X					
S	FPL Group - Stock		X		10/24/90		X					
S	Pacific Western - Stock	X			12/17/90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name

Janis L. Meyers

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Congressional Institute		2/22-24/90	Roundtrip train Wash., D.C. to Princeton, meal & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Janis L. Meyers

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app. 6, §101 et seq). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jan Meyers	May 10, 1991

House of Representatives
Washington, D.C. 20515

MEMORANDUM

REASON FOR INCREASE IN ASSETS
IS DUE PRIMARILY TO DISTRIBUTION
OF HUSBAND'S RETIREMENT PROGRAM.

Jan Meyers, M.C.

Jan Meyers

May 14, 1991

JAN MEYERS
3D DISTRICT KANSAS
WASHINGTON OFFICE
1230 LONGWORTH HOUSE OFFICE BUILDING
(202) 225-2865
DISTRICT OFFICE
204 FEDERAL BUILDING
KANSAS CITY KS 66101
(913) 621-0832
DISTRICT OFFICE
7133 WEST 95TH STREET
SUITE 217
OVERLAND PARK KS 66212
(913) 383-2013

Congress of the United States
House of Representatives
Washington, DC 20515

SMALL BUSINESS COMMITTEE
RANKING REPUBLICAN SUBCOMMITTEE
REGULATION BUSINESS OPPORTUNITIES AND ENERGY
FOREIGN AFFAIRS COMMITTEE
SUBCOMMITTEES
EUROPE AND THE MIDDLE EAST
WESTERN HEMISPHERE AFFAIRS
SELECT COMMITTEE ON AGING
VICE CHAIRMAN
ENVIRONMENTAL AND ENERGY STUDY COMMITTEE
AT-LARGE MEMBER
REPUBLICAN POLICY COMMITTEE

HAND DELIVERED

May 29, 1991

1991 MAY 30 AM 8 55
U.S. House of Representatives

U.S. House of Representatives
Committee on Standards of Official Conduct
HT-2, U.S. Capitol
Washington, D.C. 20515

MC (4)

Dear Friends:

The following is my response to the two questions asked on your Form A Checklist:

Computer Science and Nynex Stock

In 1989 my mother gave me 100 shares of 2 stocks which meet the reporting criteria of the Financial Disclosure Statement.

These stocks were Computer Sciences; and Stockholder Systems, which was purchased by Nynex in 1990. They are both listed in the report for 1990, and with this letter I am requesting amendment of my report for 1989.

I regret the omission last year. Both my parents died in 1989--my father in May, and my mother in December. I felt great concern about their illness and acquired new responsibilities as personal representative for their estates in 1989 and 1990. Perhaps this led to the omission.

Carnegie Fund & Meredith Stocks

My husband retired in 1990 and most of his retirement program was rolled into an I.R.A.

Some of the retirement program was made up of his personal contribution. Taxes had already been paid on this portion, and it did not become part of the I.R.A. This portion of his retirement program is invested in the Carnegie Money Market Fund.

It has been my understanding (see attached letter) that if retirement funds were not available to us and we did not receive income from them in a given year, we need not report such funds until retirement.

Meredith Stocks were not reported until after my husband's retirement in January, 1990, because they were not available to us, and we did not receive income from them.

Under Part VII, please note that I have deleted the reporting of Congressional Institute conference at Princeton with this amended copy. (I attended in 1991, but not in 1990.)

Sincerely,

Jan Meyers

Jan Meyers
Member of Congress

JM:am
Enclosure

JAN MEYERS
5th DISTRICT, KANSAS
FOREIGN AFFAIRS COMMITTEE
SUBCOMMITTEES
EUROPE AND THE MIDDLE EAST
HUMAN RIGHTS AND INTERNATIONAL ORGANIZATIONS
SMALL BUSINESS COMMITTEE
SUBCOMMITTEES
SBA, AND THE GENERAL ECONOMY
REGULATION AND BUSINESS OPPORTUNITIES
SELECT COMMITTEE ON AGING

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
318 CANNON HOUSE OFFICE BUILDING
(202) 225-2865
DISTRICT OFFICE
204 FEDERAL BUILDING
KANSAS CITY, KS 66101
(913) 621-0832

May 16, 1988

U.S. House of Representatives
Committee on Standards of Official Conduct
HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Friends:

My husband is employed by KCTV-5, a Meredith television station. In addition to his pension fund, there is an Employee Savings and Investment Program. As a participant in this program my husband purchases Meredith Stock. This stock is not accessible to him until he leaves the company or retires...with this exception--he is allowed to take possession of one year's stock purchase--the most recently vested year. However, if he does not, then it is not available to him until he leaves or retires. We have never taken advantage of this exception.

Every year (because I'm afraid I'll omit something I should list) I call your offices to inquire if I have to list this stock. Every year I'm told "no", as Elvita Hutchins-Taylor told me last week when I spoke with her about this.

I thought you would probably appreciate it if I wrote a letter, asking for a response in writing, rather than calling in with the same question again in 1989.

Thank you for your patience.

Sincerely,

Jan Meyers

Jan Meyers
Member of Congress

JM:am

A M E N D M E N T

Reporting Individual's Name
JANIS L. MEYERS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Kweisi Mfume
(Full Name)

217 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Maryland District: 7th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC
(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	SEE ATTACHED			

For additional earned income, use next page

2655

Reporting Individual's Name

Kweisi Mfume

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	3403 N. Hilton Road, Balto.				X							X										X					

For additional assets and unearned income, use next page

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Reporting Individual's Name

Kweisi Mfume

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Loyola Federal Savings, Baltimore	Mortgage on 3403 N. Hilton Rd Baltimore, Maryland			X				

Reporting Individual's Name

Kweisi Mfume

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Greenwood CME Church		1/15/90	Roundtrip air-fare between Baltimore and Memphis, TN provided in connection with speaking engagement	
Connell Rice & Sugar Co., Inc.		6/21/90	Roundtrip air-fare between Baltimore and Newark, NJ provided in connection with a speaking engagement	
American League of Financial Institutions		8/10/90	Overnight Lodging & Roundtrip air-fare between Balto. and Chicago, IL provided in connection with speaking	
National Association of Real Estate Brokers, Inc.		8/13/90	Overnight Lodging & one way (return) Train fare from Atlantic City, NJ to Balto. in connection with speaking	
Southern Education Foundation		11/8/90	Roundtrip air-fare between Baltimore and Atlanta, GA provided in connection with a speaking engagement	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Kweisi Mfume

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Board Member	Big Brothers & Big Sisters of Central Maryland
Regent	Morgan State University
Member Board of Trustees	Baltimore Museum of Art

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Kweisi Mfume	May 15, 1991

GPO 1991 37-598 (m)

1990 HONORARIA EARNED

Date of Engagement or Check	From Whom	Amount
January 11, 1990	Maryland State Teachers Association, Inc. Keynote Speaker, MLK, Jr. Program - Baltimore	$2,000.00
January 14, 1990	Israel Baptist Church Speaker, MLK, Jr. Program, Baltimore	$ 100.00
January 15, 1990	Greenwood CME Church Speaker, MLK, Jr. Program, Memphis, TN	$ 500.00
February 8, 1990	Howard University 1/3 of A Nation Task Force Conf. (Speaker 11/9/89) Washington, D.C.	$1,000.00
February 12, 1990	National Association of Personnel Workers- Spkr at Annual Conference in Washington, D.C.	$ 500.00
February 25, 1990	Community Baptist Church Spkr, Black History Month Baltimore, MD	$ 300.00
February 26, 1990	American Bankers Assoc. Conference Spkr, Washington, D.C.	$2,000.00
March 13, 1990	National Bankers Assoc. Conference Spkr, Washington, D.C.	$2,000.00

1990 HONORARIA EARNED
PAGE 2

April 6, 1990	Anne Arundel County Public Schools, Spring Conf Spkr-Baltimore, MD	$1,000.00
April 9, 1990	The Brookings Institution Breakfast Speaker, Wash - ington, D.C.	$ 400.00
April 25, 1990	National Bar Association Spkr - Mid Year Conf. Washington, D.C.	$1,000.00
April 29, 1990	Holy Trinity First Baptist Church - Banquet Speaker Delmar, MD	$ 800.00
June 21, 1990	Connell Rice & Sugar Co. Luncheon Speaker, West - field, N.J.	$2,000.00
August 10, 1990	American League of Finan- cial Institutions-Spkr at RTC Conf. Chicago,ILL	$2,000.00
August 13, 1990	National Association of Real Estate Brokers, Inc. Convention Speaker, At- lantic City, N.J.	$2,000.00
September 13, 1990	Delaware Management Company, Inc. Panelist Washington, D.C.	$1,500.00
November 8, 1990	Southern Education Foundation, Inc, Conf. Speaker - Atlanta, GA	$1,500.00
	1990 TOTAL HONORARIA EARNED	$20,600.00
	1990 HONORARIA DONATED TO CHARITY	$ 3,765.00

Kweisi Mfume, Maryland

1990 HONORARIA DONATED TO CHARITY

ORGANIZATION	AMOUNT DONATED
Brown's Memorial Church	$ 865.00
Big Brothers & Big Sisters	$ 500.00
New Shiloh Church	$ 500.00
Operation Understanding	$ 500.00
NAACP Baltimore Chapter	$ 500.00
Baltimore Museum of Art	$ 200.00
Baltimore Neighborhoods, Inc.	$ 200.00
First Baptist Church of Balto.	$ 200.00
United Cerebral Palsy	$ 100.00
Camp Farthest Out	$ 100.00
Rainbow's End	$ 100.00
TOTAL AMOUNT DONATED:	$ 3,765.00

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 10 25
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Robert H. Michel
(Full Name)

H-232, U.S. Capitol
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Illinois, District: 18th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) (9)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Tribune Broadcasting, Phoenix, Ariz. (Speech made 3/10/89; check rec'd 1/2/90)	Speech	$ 500	
	Blue Cross/Blue Shield, Chic.,Ill. (Speech made 11/10/89; check rec'd 1/5/90)	Speech	7,500	$5,500 to Charity
	Fire Suppression Systems, Palm Springs, Cal(1/14/90)	Speech	1,500	
	Tobacco Institute, Palm Springs, Cal. (1/17/90)	Speech	2,000	
	Nat'l Assoc. of Broadcasters, Palm Springs, Cal. (1/13/90)	Speech	2,000	
	Pharmaceutical Mfgrs., Scottsdale, Ariz. (2/16/90)	Speech	2,000	
	Corning Glass Works Conference, Augusta, Ga. (3/16/90)	Speech	500	
	Nat'l Assoc. Truck Stop Operators, Wash., D.C. (4/2/90)	Speech	2,000	
	Associated General Contractors, Wash., D.C. (4/24/90)	Speech	2,000	
	Nat'l Assoc. of Realtors, Wash., D.C. (4/25/90)	Speech	2,000	

For additional earned income, use next page

Reporting Individual's Name
Robert H. Michel

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Spiegel, New York City (5/8/90)	Speech	$2,000	
Chamber of Commerce, Wash., D.C. (5/10/90)	Speech	500	
National Retail Federation, Wash., D.C. (5/10/90)	Speech	2,000	
Philip Morris Management Corp., Palm Beach, Fla. (2/18/90)	Speech	2,000	
Natural Gas Association, Wash., D.C. (6/5/90)	Speech	2,000	
J.C. Penney, Wash., D.C. (6/20/90)	Speech	2,000	
Air Transport Assoc., Wash., D.C. (6/29/90)	Speech	2,000	
American Assoc. of Equipment Lessors, Was., D.C. (6/27/90)	Speech	2,000	x
Tobacco Institute, Was., D.C. (7/11/90)	Speech	2,000	x
New York Times (7/21/90)	Article	150	x
Grocery Mfgrs. Assoc., Greenbrier, W. Va. (6/18/90)	Speech	2,000	x
Int'l Business Machines, Wash., D.C. (9/12/90)	Speech	2,000	x
Blue Cross/Blue Shield, Wash., D.C. (9/19/90)	Speech	2,000	x
National Broiler Council, Wash., D.C. (9/27/90)	Speech	2,000	x
American Bakers Assoc., Wash., D.C. (10/8/90)	Speech	2,000	x
American Stock Exchange, Wash., D.C. (10/15/90)	Speech	2,000	x
Fay Improvement Co Three Day Seminar, Palm Spr., Cal. (11/15,16,17, 1990)	Speeches	6,000	x

1990 CONTRIBUTIONS

Bradley University	$9,700
Danny Thompson Leukemia Research	2,500
United Way	1,500
Apostolic Christian Church	1,500
Eureka College	1,000
Illinois College	1,000
MacMurray College	1,000
Lakeview Museum	575
Salvation Army	500
Red Cross	500
Youth Farm	500
Y.M.C.A.	500
Miami Valley Childrens Center	500
Grace Ranch	500
First Presbyterian Church	500
Peoria Symphony Orchestra	500
Easter Seals	250
Carver Community Center	250
Illinois Valley Mental Health	225
United Cerebral Palsy	200
Blind Peoples Center	200
St. Jude Affiliate	200
South Side Mission	200
Common Place	200
Childrens Home	200
Friendship House	200
Tri-County Womens Strength	200
Family House	200
Boy Scouts	200
Girl Scouts	200
Planned Parenthood	200
Youth Symphony	200
Civic Opera	200
Journal Star Christmas Fund	200
American Cancer Society	150
American Heart Assoc.	100
Childrens National Medical Center	100
Arthritis Foundation	100
Nina Hyde Breast Cancer Center	100
Women Against Racism	100
Capitol Hill Choral Society	100
National Society of Arts & Letters	75
University of Illinois Foundation	50
Arthritis Foundation	50
Peoria Historical Society	50
Peoria Jaycees Charity	50
Art Show Benefit	35
B'nai B'rith	25
League of Women Voters Fund Drive	25
Methodist Medical Center	25
DAR Ties That Bind Project	15
TOTAL	$27,650

Reporting Individual's Name
Robert H. Michel

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
		2/3 interest in 320 8th St. Assoc.					X						X										X					
		Columbia First Bank (CD)			X									X					X									X
		Ohio National		X										X					X									
		TransAmerica		X										X					X									
		Shearson-Lehman IRA			X								None															
		Shearson-Lehman Keogh					X						None															

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert H. Michel

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Federal Credit Union		X										X							X							
	Shearson Lehman -Burney Co.				X						X									X							X
	Shearson Lehman -Sirach Capital					X					X									X							X

Financial Disclosure A-2(a)

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Reporting Individual's Name
Robert H. Michel

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Shearson Lehman-Burney Co. (Changed from Burney to Sirach)			x	7/13/90			x				
	Shearson Lehman-Sirach Capital			x	7/13/90			x				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Talman Home Mortgage Co.	2/3 Mortgage on 320 8th St.,S.E., Wash., D.C.			x				

Reporting Individual's Name
Robert H. Michel

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Bob Hope/Chrysler Desert Classic (Charity Golf Tournament)	Golf Clothing & accessories	Less than $200
Orrefors Crystal, Berlin, N.J.	Crystal clock with "Bob Hope Desert Classic" engraved on it	$100
AT&T Pebble Beach Golf Tournament (Charity Golf Tournament)	Golf clothing & accessories	Less than $200
J.C. Penney Golf Tournament (Charity Golf Tournament)	Golf clothing & accessories	Less than $200
Kemper Golf Tournament (Charity Golf Tournament)	Golf clothing & accessories	Less than $200

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Tribune Broadcasting	3/10/89	Roundtrip Air Travel from Wash., D.C. to Phoenix, 3 days food & lodging	
National Assoc. Broadcasters	1/13/90	Oneway Air Travel from Wash., D.C. to Palm Springs, self & spouse	
Bob Hope Desert Classic (Charity Golf Tournament)	1/21/90	Oneway Air Travel from Palm Spr. to Wash., D.C., self & spouse	
AT&T Pebble Beach Nat'l Pro-Am (Charity Golf Tournament)	1/31-2/5	(Trip approved by Committee on Standards) Roundtrip Air Travel D.C. to San Fran, 5 days food & lodging	
Pharmaceutical Mfgrs.	2/16-18	Oneway Air Travel Peo, Ill-Phoenix-Palm Beach, Fla, 2 days food & lodging in Phoenix	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

PART VII - Reimbursements, continued

Philip Morris Management Corp.	2/18-21	Oneway Air Travel Palm Beach to D.C., 3 days food & lodging
Congressional Institute	2/22-24	Roundtrip Rail Travel D.C.-Princeton, 2 days food & lodging, self & spouse
Corning Glass Works Conference	3/16-18	Roundtrip Air Travel D.C.-Augusta, Ga., 2 days food & lodging
Grocery Mfgrs. Assoc.	6/18	Roundtrip Air Travel D.C.-Greenbrier, W. Va.
Danny Thompson Memorial Golf Tourn (Charity Golf Tournament)	8/19-27	Roundtrip Air Travel Peo.Ill-Sun Valley, Id., 4 days food & lodging, self & spouse (additional days own expense)
Fay Improvemnet Co.	11/15-18	Roundtrip Air Travel D.C.-Palm Springs, 3 days food & lodging, self & spouse
J.C. Penney Golf Tournament (Charity Golf Tournament)	11/25-28	Roundtrip Air Travel D.C.-Tampa, Fla., 3 days food & lodging

Reporting Individual's Name
Robert H. Michel

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Bradley University (uncompensated)
Partner	320 8th St., S.E. Assoc.
Director	Dirksen Congressional Research Center (uncompensated)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert Michel	May 14, 1991

GPO 1991 37-59[illegible] (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:58
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Clarence E. Miller
(Full Name)

2308 Rayburn HOB
(Mailing Address)

Washington D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State Ohio District: 10th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) (6)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Columbia Gas Company	pension	1,508.00	
	U.S. Government	social security	13,036.00	

For additional earned income, use next page

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Reporting Individual's Name

Clarence E. Miller

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash. Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	Wright Patman Federal Credit Union Congressional					X							X								X					
	Prudential Insurance Company			X									X						X							
	Household Bank	X											X				X									
	Newell Company	X									X						X									
	Equitable Insurance		X										X				X									
	IRA Retirement All			X									X					X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clarence E. Miller

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Lot 52 Rising Park ~~Lancaster~~			X														X								
	Lot 51 " " "			X														X								
	Metropolitan Life		X								X							[illegible]								

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Reporting Individual's Name

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
Clarence E. Miller

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Clarence E. Miller

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Clarence Miller	May 14, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 11: 33
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

GEORGE MILLER
(Full Name)

2228 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	X Member of the U.S. House of Representatives	State: CA District: 7	Officer or Employee	Employing Office:
Report Type	X Annual (May 15)	Amendment	Termination	Termination Date:

mc (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Henry Clay Society (Jan. 4, 1990)	speech	$1,000	
	Hotel & Restaurant Employees International Union (Jan. 25, 1990)	speech	$2,000	
	American Association of Equipment Lessors (January 15, 1990)	speech	$2,000	
	Building & Construction Trades Department (January 18, 1990)	speech	$2,000	
	Metropolitan Life Insurance Company (February 27, 1990)	speech	$2,000	
	Washington Breakfast Seminar (Feb. 6, 1990)	speech	$1,000	
	National Recreation and Park Association (February 5, 1990)	speech	$500	
	The Nation (February 16, 1990)	article	$25	
	Board of Trade of the City of Chicago (April 11, 1990)	speech	$1,000	
	National Assoc. of Children's Hospitals & Related Institutions, Inc. (March 13, 1990)	speech	$500	

For additional earned income, use next page

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Reporting Individual's Name
George Miller

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Los Angeles Times (March 30, 1990)	article	$250	
International Union of Elevators Constructors (April 4, 1990)	speech	$1,000	
National School Boards Association (April 12, 1990)	speech	$1,000	
National School Boards Association (May 30, 1990)	speech	$1,000	
Domestic Petroleum Council (May 16, 1990)	speech	$2,000	
Massachusetts Mutual Life Ins. Co. (May 21, 1990)	speech	$2,000	
American Nuclear Energy Council (June 4, 1990)	speech	$2,000	
The Christian Science Publishing Society (July 19, 1990)	article	$50	
California Cable Television Association (August 6, 1990)	speech	$1,500	
Los Angeles Times (August 15, 1990)	article	$250	
American Greyhound Track Operators Assoc. (Sept. 18, 1990)	speech	$1,000	
National Restaurant Association (November 21, 1990)	speech	$2,000	
National Assoc. of Juvenile & Family Court Judges (Jan. 12, 1990)	speech	$1,500	$725 to charity

Reporting Individual's Name
GEORGE MILLER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	127 D St., SE, Wash., DC						X					X										X					
S	IRA Money Market Fund, Charles Schwab Co.		X										X						X								
	Stock Fund, S.I.F.E. Trust, Walnut Creek, California (IRA)		X								X								X								
JT	Stock Fund, Putnam Mutual Fund (401K)		X								X								X								
JT (with son)	2002 Greene St., Apt. 412, Columbia, S.C. (half interest w/son)				X																						

For additional assets and unearned income, use next page

Reporting Individual's Name

GEORGE MILLER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Wright Patman Congressional Federal Credit Union, Wash., DC	personal loan	X						
	Columbia First Federal Savings & Loan Assoc., Wash., DC	mortgage on 127 D St., SE, Wash., DC			X				
	Security Mortgage Co., Columbia, South Carolina	mortgage on 2002 Greene St., Apt. 412, Columbia, S.C.			X				

Reporting Individual's Name
GEORGE MILLER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hotel & Restaurant Employees Inter-National Union		Jan. 8-10, 1990	Roundtrip air travel from San Francisco to Hawaii & return; 3 days food & lodging, self and spouse	
National Assoc. of Juvenile & Family Court Judges		Dec. 9-10, 1989	Air travel from Los Angeles to Miami to Wash., DC; 1 day lodging and cab	
Metropolitan Life Insurance Co.		Jan. 25-29, 1990	Roundtrip air travel from Wash., DC, to New Orleans & return; 4 days food & lodging, self & son	
Chicago Board of Trade		March 8-11, 1990	Roundtrip air travel from Wash., DC, to West Palm Beach & return; 3 days food and lodging	
National School Boards Association		Apr. 20-22	Air travel from Wash., DC, to New Orleans to Detroit; 2 days food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)
Enron Corporation	June 28-July 2, 1990	Roundtrip air travel Wash., DC, to Wyoming and return; 2 days food & lodging; extended trip at own expense

Reporting Individual's Name
GEORGE MILLER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
G. Miller	5-15-91

GPO: 1991 37-598 (m)

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 11:33
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(8)
(Office Use Only)

1991 JUN -3 AM 11:17

GEORGE MILLER
(Full Name)

2228 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 7	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Henry Clay Society (Jan. 4, 1990)	speech	$1,000	
	Hotel & Restaurant Employees International Union (Jan. 25, 1990)	speech	$2,000	
	American Association of Equipment Lessors (January 15, 1990)	speech	$2,000	
	Building & Construction Trades Department (January 18, 1990)	speech	$2,000	
	Metropolitan Life Insurance Company (February 27, 1990)	speech	$2,000	
	Washington Breakfast Seminar (Feb. 6, 1990)	speech	$1,000	
	National Recreation and Park Association (February 5, 1990)	speech	$500	
	The Nation (February 16, 1990)	article	$25	
	Board of Trade of the City of Chicago (April 11, 1990)	speech	$1,000	
	National Assoc. of Children's Hospitals & Related Institutions, Inc. (March 13, 1990)	speech	$500	

use next page

Reporting Individual's Name
George Miller

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Los Angeles Times (March 30, 1990)	article	$250	
International Union of Elevators Constructors (April 4, 1990)	speech	$1,000	
National School Boards Association (April 12, 1990)	speech	$1,000	
National School Boards Association (May 30, 1990)	speech	$1,000	
Domestic Petroleum Council (May 16, 1990)	speech	$2,000	
Massachusetts Mutual Life Ins. Co. (May 21, 1990)	speech	$2,000	
American Nuclear Energy Council (June 4, 1990)	speech	$2,000	
The Christian Science Publishing Society (July 19, 1990)	article	$50	
California Cable Television Association (August 6, 1990)	speech	$1,500	
Los Angeles Times (August 15, 1990)	article	$250	
American Greyhound Track Operators Assoc. (Sept. 18, 1990)	speech	$1,000	
National Restaurant Association (November 21, 1990)	speech	$2,000	
National Assoc. of Juvenile & Family Court Judges (Jan. 12, 1990)	speech	$1,500	$725 to charity

Reporting Individual's Name

GEORGE MILLER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
✓		127 D St., SE, Wash., DC						X					X										X					
✓ S		IRA Money Market Fund, Charles Schwab Co.		X										X						X								
✓		Stock Fund, S.I.F.E. Trust, Walnut Creek, California (IRA)		X								X								X								
✓ JT		Stock Fund, Putnam Mutual Fund (401K)		X								X								X								
JT (with son)		2002 Greene St., Apt. 412, Columbia, S.C. (half interest w/son)				X																						
DC		Savings Account: 100 shares of Bank of America		X																								

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: GEORGE MILLER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Savings Account: 200 shares of Hotel Investors		X																								
DC	Savings Account: 200 shares of Seagate Technology		X																								

Reporting Individual's Name
GEORGE MILLER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
	Wright Patman Congressional Federal Credit Union, Wash., DC	personal loan	X						
	Columbia First Federal Savings & Loan Assoc., Wash., DC	mortgage on 127 D St., SE, Wash., DC			X				
	Security Mortgage Co., Columbia, South Carolina	mortgage on 2002 Greene St., Apt. 412, Columbia, S.C.			X				

2689

Reporting Individual's Name
GEORGE MILLER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hotel & Restaurant Employees Inter-National Union	Jan. 8-10, 1990	Roundtrip air travel from San Francisco to Hawaii & return; 3 days food & lodging, self and spouse	
National Assoc. of Juvenile & Family Court Judges	Dec. 9-10, 1989	Air travel from Los Angeles to Miami to Wash., DC; 1 day lodging and cab	
Metropolitan Life Insurance Co.	Jan. 25-29, 1990	Roundtrip air travel from Wash., DC, to New Orleans & return; 4 days food & lodging, self & son	
Chicago Board of Trade	March 8-11, 1990	Roundtrip air travel from Wash., DC, to West Palm Beach & return; 3 days food and lodging	
National School Boards Association	Apr. 20-22	Air travel from Wash., DC, to New Orleans to Detroit; 2 days food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)
Enron Corporation	June 28-July 2, 1990	Roundtrip air travel Wash., DC, to Wyoming and return; 2 days food & lodging; extended trip at own expense

Reporting Individual's Name

GEORGE MILLER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
George Miller	5-15-91

GPO 1991 37 5/49 (m)

2692

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 16 AM 11: 36
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 15 1991

MC (Office Use Only) 7

JOHN RIPIN MILLER
(Full Name)

439 SECOND STREET SOUTHEAST
(Mailing Address)

WASHINGTON D.C. 20003

Filer Status	[X] Member of the U.S. House of Representatives — State: Washington District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	[see attached]			

For additional earned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: JOHN RIPIN MILLER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	[see attachment]																									

Financial Disclosure A-2(a)

2694

Reporting Individual's Name

JOHN RIPIN MILLER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	[see attachment]											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2695

Reporting Individual's Name

JOHN RIPIN MILLER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

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NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
[SEE ATTACHMENT]				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

JOHN RIPIN MILLER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

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NONE [X]

Positions	Name of Organization

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NONE [X]

Date	Parties To	Terms of Agreement

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TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

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SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John Miller	5/14/91

GPO: 1991 37-568 (m)

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT 1990

PART I - EARNED INCOME, INCLUDING HONORARIA

BROOKINGS INSTITUTE	07-18-90	Speech	400	Rec'd
SEATTLE WEEKLY	05-18-90	~~Speech~~ article	50	Rec'd

PART II AND III - ASSETS AND UNEARNED INCOME

	BLOCK A	BLOCK B	BLOCK C	BLOCK C	BLOCK D
JT	AETNA LIFE	B	Dividend	II	
JT	ALDUS CORP	B			Sold
JT	ALLERGAN	A	Dividend	I	Sold
JT	AMER. ELEC PWR	C	Dividend	III	
JT	AMER. T & T	C	Dividend	III	
JT	AMETEK	B	Dividend	II	
JT	B A T INDS	C	Dividend	IV	
JT	BEAR STEARNS	B	Dividend	I	Sold
JT	BEAR STEARNS CASH FUND	B	Interest	I	
JT	BECKMAN INSTR.	A	Dividend	I	
JT	BECTON DICKINSON	C	Dividend	II	
JT	BELLSOUTH	C	Dividend	III	
JT	BRIDGEPORT CT	C	Interest	IV	
JT	BULLARD TEX INDPT-BOND	B			
JT	EGGHEAD	B			
JT	ELDEC CORP	B			Sold
JT	FIDELITY MAGELLAN	D	CGD, Dividend	IV	
JT	FIDELITY OVERSEAS	C	CGD, Dividend	III	
JT	FIRST TR INSD. MUN. #129	C	Int & Princ	V	
JT	FORD MOTOR	B	Dividend	III	
JT	GENERAL CINEMA	B	Dividend	I	
JT	IBM	D	Dividend	III	
JT	IRA APACHE CORP				Sold
	IRA BALCOR EQUITY	B			
	IRA FIDELITY MAGELLAN	C			
S	IRA GABELLI VALUE FD	B	Dividend		
S	IRA PHILADELPHIA SAVINGS	B			Bought
JT	IRA PIPER JAFREY MONEY MKT	B			
JT	KETEMA	B			Sold
JT	LOTUS DEV	B			Sold
JT	LOTUS DEV	B			
JT	MAY DEPT STORES	C	Dividend	III	
JT	MCDONALDS	B	Dividend	I	
JT	MICROSOFT	C			
JT	NORDSTROM	C	Dividend	II	
JT	NOVO NORDISK	B	Dividend	I	
JT	NY MUNI INVST TR#12	B	Interest	II	
JT	NY MUNI INVST TR.#626232334	C	Interest	IV	
JT	NY MUNIC ASSTC.#626190JF0	D	Interest	V	
JT	NY PUB IMP -SUFFOLK CTY #864	C	Interest	IV	
JT	NYC G/O SER C #649646MN3	C	Interest	III	
JT	NYS DORM AUTH #649830GN0	C	Interest	III	
JT	NYS HOUSING FIN AGCY	B	Interest	II	
JT	NYS MORTG. AGCY#R-117	B	Interest	II	
JT	PEPSICO	C	Dividend	II	
JT	PERIPHERAL SYSTEMS	A			Sold

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT 1990

PART II AND III - ASSETS AND UNEARNED INCOME [continued]

	BLOCK A	BLOCK B	BLOCK C	BLOCK C	BLOCK D
JT	PHILLIPS PETROLEUM	C	Dividend	II	
JT	PIPER JAFFRAY MONEY MKT	D	Interest	II	
JT	SCHLUMBERGER LTD	C	Dividend	II	
JT	SHEARSON FMA CASH FUND	A	Interest	I	
JT	SHEARSON GLBL. OP	B			Sold
JT	SHURGARD INCOME PROP.	B	Int & Ord Inc	II	
JT	SILVER SCREEN PTRS	B	Int & Ord Inc	III	
JT	SLH PORTFOLIO-TAX EX.	D	Dividend	V	Sold
JT	SMITHK.BEECHAM UNITS	B	Dividend	I	
JT	SOUTHERN CO	C	Dividend	III	
JT	UNCOMMON VAL. UT TR #86	B	Dividend	I	Sold
JT	US WEST	C	Dividend	III	
JT	VENTURE STORES	A	Dividend	I	
JT	VENTURE STORES	A	Spinoff		Sold
JT	WESTMARK INTERN.	B	Spinoff		
JT	State of Israel bond	A		I	Bought

++END++

PART IV - TRANSACTIONS

	ASSET	TYPE	DATE	AMT
JT	ALDUS CORP	Sold	01-04-90	B
JT	ALLERGAN INC	Sold	07-13-90	A
JT	BEAR STEARNS	Sold	11-30-90	B
JT	ELDEC	Sold	07-20-90	B
S	IRA-APACHE CORP	Sold	03-01-90	B
S	IRA-PHILADELPHIA SAVINGS	Bought	03-01-90	B
JT	KETEMA	Sold	01-11-90	B
JT	LOTUS	Sold	01-11-90	B
JT	PERIPHERAL SYST	Sold	12-07-90	A
JT	SLH GLOBAL OP	Sold	04-03-90	B
JT	SLH PORTFOLLIO	Reinv Div	Monthly	B
JT	SLH PORTFOLLIO	Sold	12-07-90	D
JT	UNC VAL UT TR#86	Sold	06-13-90	B
JT	VENTURE STORES	Sold	11-06-90	A
JT	VENTURE STORES	Spinoff	10-15-90	A
JT	State of Israel bond	Bought	[redacted] 12.1.90	A

++END++

PART VII - REIMBURSEMENTS OF TRANSPORT., LODGING, FOOD, ENTERTAINMENT

SPONSOR-FARLEIGH DICKINSON UNIVERSITY 04-06-90 TO 04-12-90
Anglo-American Parliamentary Conference at Wroxton England
Roundtrip air travel, plus food and lodging for self & spouse

[redacted]

++END++

RECEIVED
1991 JUN 10 PM 2:10
U.S. HOUSE OF REPRESENTATIVES

EVE IRVINE
9034 BURKE AVE. N.
SEATTLE, WA 98103

HAND DELIVERED

U.S. HOUSE OF REPRESENTATIVES
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, DC 20515

MC

5

I have enclosed a copies of the 1989 and 1990 Financial Disclosure Statements for The Honorable John R. Miller. There is also a copy of your letter.

There is no need to amend either statement. The missing items are on the 1989 statement. I enter the names as they are listed on the stock reports. Quite often the names of bonds are listed differently. In 1989 they were entered as "Muni Invst Tr", "Munic Asstc" and "Suffolk Cty". On the 1990 statement they are shown as "NY Muni Invst Tr", "NY Munic Asstc" and "NY Pub Imp -Suffolk Cty".

I have reprinted the 1990 statement to show the changes that were made on it at the time of filing.

Eve Irvine
Eve Irvine

RECEIVED
91 JUN -7 PM 4:26
COMMITTEE ON STANDARDS

04-Jun-91

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT

III. HOLDINGS

AETNA LIFE	B
ALDUS CORP.	A
ALLERGAN	A
AMER. ELEC PWR	C
AMER. T & T	C
AMETEK	C
B A T INDS	C
BEAR STEARNS	A
BEAR STEARNS CASH FUND (AVERAGE)	B
BECKMAN INSTR.	A
BECTON DICKINSON	C
BELLSOUTH	D
BRIDGEPORT CT	C
BULLARD TEX INDPT-BOND	B
CITICORP NOTES	B
CLARK PROD.	A
DUNKIN DONUTS	B
EGGHEAD	B
ELDEC CORP	A
ERIE CO NY PUB IMP	C
FIDELITY MAGELLAN	C
FIDELITY OVERSEAS	C
FIRST TR INSD. MUN. #129	D
FORD MOTOR	C
GEN CINEMA	B
IBM	C
IRA APACHE CORP	A
IRA BALCOR	A
IRA FIDELITY MAGELLAN	A
IRA PHILADELPHIA SAVINGS	A
KETEMA	A
LOTUS DEV	A
MAY DEPT STORES	C
MCDONALDS	B
MICROSOFT	C
[redacted]	C
[redacted]	D
NORDSTROM	D
NOVO NORDISK [FORMERLY NOVO IND.]	B
NY MUNI TR#12	A
NYC G/O #649646MN3	C
NYS DORM AUTH#649830GN0	C
NYS HOUSING FIN AGCY	A
NYS MORTG. AGCY#R-117	B
NYS MTG AGCY 2ND	C
PEPSICO	C
PERIPHERAL SYSTEMS	A
PHILLIPS PETROLEUM	C
ROCHESTER COMM-CD	B
SCHLUMBERGER	C
SHEARSON FMA CASH FUND (AVERAGE)	A
SHEARSON GLBL. OP	B
SHURGARD INCOME PROP.	A
SILVER SCREEN PTRS	B

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT

III. HOLDINGS (continued)

SLH PORTFOLIO-TAX EX.	D
SMITHK.BE[redacted]AM UNITS [WAS SMITHK. BECKMAN]	A
SOUTHERN CO	C
[redacted]#864764CFO	C
UNCOMMON VAL. UT TR #86	B
US WEST	C
WESTMARK INTERN.	B

++END++

IV. TRANSACTIONS

MICROSOFT		Sold	A
CLARK PROD.		Sold	A-
DUNKIN DONUTS		Sold	A
NYS MTG AGCY 2ND		Redeemed	C
ERIE CO NY PUB IMP		Redeemed	C
NYS MTG AGCY REV		Redeemed	A
CITICORP NOTES		Redeemed	B
ROCHESTER COMM-CD		Redeemed	B
AMETEK		Bot	C
EGGHEAD		Bot	A
PERIPHERAL SYSTEMS		Bot	B
WESTMARK INT.		Bot	B
SLH PORTFOLIO TAX EXEMPT		Bot	A
SLH GLOBAL OP		Bot	A
ALLERGAN	Smithkl. Beck.	Spinoff	A
BECKMAN INSTR.	Smithkl. Beck.	Spinoff	A
KETEMA	Ametek	Spinoff	A

++END++

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT

PART I - EARNED INCOME, INCLUDING HONORARIA

BROOKINGS INSTITUTE	07-18-90	Speech	400	Rec'd
SEATTLE WEEKLY	05-18-90	Article	50	Rec'd

PART II AND III - ASSETS AND UNEARNED INCOME

	BLOCK A	BLOCK B	BLOCK C	BLOCK C	BLOCK D
JT	AETNA LIFE	B	Dividend	II	
JT	ALDUS CORP	B			Sold
JT	ALLERGAN	A	Dividend	I	Sold
JT	AMER. ELEC PWR	C	Dividend	III	
JT	AMER. T & T	C	Dividend	III	
JT	AMETEK	B	Dividend	II	
JT	B A T INDS	C	Dividend	IV	
JT	BEAR STEARNS	B	Dividend	I	Sold
JT	BEAR STEARNS CASH FUND	B	Interest	I	
JT	BECKMAN INSTR.	A	Dividend	I	
JT	BECTON DICKINSON	C	Dividend	II	
JT	BELLSOUTH	C	Dividend	III	
JT	BRIDGEPORT CT	C	Interest	IV	
JT	BULLARD TEX INDPT-BOND	B			
JT	EGGHEAD	B			
JT	ELDEC CORP	B			Sold
JT	FIDELITY MAGELLAN	D	CGD, Dividend	IV	
JT	FIDELITY OVERSEAS	C	CGD, Dividend	III	
JT	FIRST TR INSD. MUN. #129	C	Int & Princ	V	
JT	FORD MOTOR	B	Dividend	III	
JT	GENERAL CINEMA	B	Dividend	I	
JT	IBM	D	Dividend	III	
JT	IRA APACHE CORP				Sold
	IRA BALCOR EQUITY	B			
	IRA FIDELITY MAGELLAN	C			
S	IRA GABELLI VALUE FD	B	Dividend		
S	IRA PHILADELPHIA SAVINGS	B			Bought
JT	IRA PIPER JAFREY MONEY MKT	B			
JT	KETEMA	B			Sold
JT	LOTUS DEV	B			Sold
JT	LOTUS DEV	B			
JT	MAY DEPT STORES	C	Dividend	III	
JT	MCDONALDS	B	Dividend	I	
JT	MICROSOFT	C			
JT	NORDSTROM	C	Dividend	II	
JT	NOVO NORDISK	B	Dividend	I	
JT	NY MUNI INVST TR#12	B	Interest	II	
JT	NY MUNI INVST TR.#626232334	C	Interest	IV	
JT	NY MUNIC ASSTC.#626190JF0	D	Interest	V	
JT	NY PUB IMP -SUFFOLK CTY #864	C	Interest	IV	
JT	NYC G/O SER C #649646MN3	C	Interest	III	
JT	NYS DORM AUTH #649830GN0	C	Interest	III	
JT	NYS HOUSING FIN AGCY	B	Interest	II	
JT	NYS MORTG. AGCY#R-117	B	Interest	II	
JT	PEPSICO	C	Dividend	II	
JT	PERIPHERAL SYSTEMS	A			Sold

JOHN RIPIN MILLER FINANCIAL DISCLOSURE STATEMENT

PART II AND III - ASSETS AND UNEARNED INCOME [continued]

	BLOCK A	BLOCK B	BLOCK C	BLOCK C	BLOCK D
JT	PHILLIPS PETROLEUM	C	Dividend	II	
JT	PIPER JAFFRAY MONEY MKT	D	Interest	II	
JT	SCHLUMBERGER LTD	C	Dividend	II	
JT	SHEARSON FMA CASH FUND	A	Interest	I	
JT	SHEARSON GLBL. OP	B			Sold
JT	SHURGARD INCOME PROP.	B	Int & Ord Inc	II	
JT	SILVER SCREEN PTRS	B	Int & Ord Inc	III	
JT	SLH PORTFOLIO-TAX EX.	D	Dividend	V	Sold
JT	SMITHK.BEECHAM UNITS	B	Dividend	I	
JT	SOUTHERN CO	C	Dividend	III	
JT	STATE OF ISRAEL - BOND	A			
JT	UNCOMMON VAL. UT TR #86	B	Dividend	I	Sold
JT	US WEST	C	Dividend	III	
JT	VENTURE STORES	A	Dividend	I	
JT	VENTURE STORES	A	Spinoff		Sold
JT	WESTMARK INTERN.	B	Spinoff		

++END++

PART IV - TRANSACTIONS

	ASSET	TYPE	DATE	AMT
JT	ALDUS CORP	Sold	01-04-90	B
JT	ALLERGAN INC	Sold	07-13-90	A
JT	BEAR STEARNS	Sold	11-30-90	B
JT	ELDEC	Sold	07-20-90	B
S	IRA-APACHE CORP	Sold	03-01-90	B
S	IRA-PHILADELPHIA SAVINGS	Bought	03-01-90	B
JT	KETEMA	Sold	01-11-90	B
JT	LOTUS	Sold	01-11-90	B
JT	PERIPHERAL SYST	Sold	12-07-90	A
JT	SLH GLOBAL OP	Sold	04-03-90	B
JT	SLH PORTFOLLIO	Reinv Div	Monthly	B
JT	SLH PORTFOLLIO	Sold	12-07-90	D
	STATE OF ISRAEL - BOND	Bought	12-01-90	A
JT	UNC VAL UT TR#86	Sold	06-13-90	B
JT	VENTURE STORES	Sold	11-06-90	A
JT	VENTURE STORES	Spinoff	10-15-90	A

++END++

PART VII - REIMBURSEMENTS OF TRANSPORT., LODGING, FOOD, ENTERTAINMENT

SPONSOR-FARLEIGH DICKINSON UNIVERSITY 04-06-90 TO 04-12-90
Anglo-American Parliamentary Conference at Wroxton England
Roundtrip air travel, plus food and lodging for self & spouse

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 4:35

HAND DELIVERED

MC (Office Use Only) 10

Norman Y. Mineta
(Full Name)

2350 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State CA District 13th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Flour Daniel, Inc., Irvine, CA (2-14-90)	Honorarium	$1,000	
	Electronic Industries Assn., Washington, D.C. (2-2-90)	Honorarium	$1,000	
	Downtown Progress Assn., Las Vegas, NV (2-5-90)	Honorarium	$1,000	
	National Stone Assn., Washington, D.C. (1-28-90)	Honorarium	$2,000	
	Am. Road & Transportation Builders Assn., Wash., D.C. (2-22-90)	Honorarium	$2,000	
	Am. Public Transit Assn., Washington, D.C. (3-16-90)	Honorarium	$2,000	
	Am. Trucking Assns., Inc., Washington, D.C. (3-13-90)	Honorarium	$2,000	
	Am. Traffic Safety Services Assn., Inc., Fredericksburg, VA (4-19-90)	Honorarium	$2,000	
	The Associated General Contractors of Am., Wash., D.C. (3-23-90)	Honorarium	$2,000	
	Interstate Truckload Carriers Conference, Alexandria, VA (6-29-90)	Honorarium	$2,000	X

For additional earned income, use next page

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Reporting Individual's Name
Norman Y. Mineta

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Assn. of American Railroads, Washington, D.C. (4-7-90)	Honorarium	$2,000	
Ashland Oil, Inc., Ashland, KY (4-12-90)	Honorarium	$2,000	
Council of Scientific Society Presidents, Wash., D.C. (5-29-90)	Honorarium	$ 250	
The Natl. Industrial Transportation League, Wash., D.C. (5-15-90)	Honorarium	$1,000	
Associated Equipment Distributors, Washington, D.C. (6-22-90)	Honorarium	$1,000	X
Am Assn. of Airport Executives., Alexandria, VA (5-21-90)	Honorarium	$1,000	
Natl. Tank Truck Carriers, Inc., Alexandria, VA (5-30-90)	Honorarium	$2,000	
Am. Society of Civil Engineers, Washington, D.C. (6-4-90)	Honorarium	$1,000	
Truck Renting & Leasing Assn., Washington, D.C. (6-5-90)	Honorarium	$1,000	X
Am. Road & Transportation Builders Assn., Wash., D.C. (6-11-90)	Honorarium	$1,500	X
Natl. Assn. of Broadcasters, Washington, D.C. (6-23-90)	Honorarium	$1,000	X
SEDCORP Conference Committee, Fairfield, CA (11-13-90)	Honorarium	$2,000	X
Natl. Motor Freight Traffic Assn., Inc., Alexandria, VA (9-10-90)	Honorarium	$2,000	X
CA Cable Television Assn., Oakland, CA (8-23-90)	Honorarium	$1,500	X
Motor Vehicle Manufacturers Assn of the U.S., Inc., Detroit, MI (9-4-90)	Honorarium	$2,000	X
Am. Public Works Assn., Washington, D.C. (9-17-90)	Honorarium	$2,000	X
Intl. Brotherhood of Painters & Allied Trades, Wash, D.C. (4-23-90)	Honorarium	$2,000	
National Stone Assn., Washington, D.C. (9-21-90)	Honorarium	400	X
Wake Stone Corp., Knightdale, NC (9-21-90)	Honorarium	100	X
Nello L. Teer Co., Durham, NC (9-21-90)	Honorarium	250	X

Reporting Individual's Name
Norman Y. Mineta

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Better Transportation for North Carolina, Inc., Raleigh, NC (9-21-90)	Honorarium	$ 300	X
North Carolina Petroleum Marketers Assn., Inc., Raleigh, NC (9-21-90)	Honorarium	$ 250	X
Vulcan Materials Co., Winston-Salem, NC (9-21-90)	Honorarium	$ 250	X
Consulting Engineer Council of N.C., Raleigh, NC (9-21-90)	Honorarium	$ 200	X
North Carolina Trucking Assn., Inc., Raleigh, NC (9-21-90)	Honorarium	$ 200	X
N.C. Dump Truck Assn., Raleigh, NC (9-21-90)	Honorarium	$ 200	X
Salomon Brothers, Inc., New York, NY (11-15-90)	Honorarium	$1,500	X

Reporting Individual's Name
Norman Y. Mineta

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
	Union Bank Stock			X								X								X								
	Southern California Edison Stock		X									X							X									
	Residence at: 1564 Peregrino Way, San Jose, CA							X					X											X				
	Wright Patman Congressional Federal Credit Union Account		X											X						X								
	**																											
	1/5 interest in improved property at 545 N. 5th St., San Jose, CA			X															X									

For additional assets and unearned income, use next page

**Perpetual Account deleted as it is an IRA and need not be reported.

2708

Reporting Individual's Name
Norman Y. Mineta

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Coast Funding Copr, San Jose, CA	Mortgage on 1564 Peregrino Way San Jose, CA					X		
	William J. Elfving, Esq.	Attorney's fee		X					

Reporting Individual's Name
Norman Y. Mineta

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Electronic Industries Assn.	Jan 7-8	Airfare from San Jose, CA to Las Vegas, NV, lodging & meals	
Downtown Progress Assn., Las Vegas	Jan 8	Airfare from Las Vegas, NV to San Francisco, CA, meal	
National Stone Assn.	Jan 28	Airfare from San Jose,CA to Las Vegas, NV to Washington, D.C., meal	
Am Road & Transportation Builders Assn	Feb 9-13	Roundtrip airfare from San Francisco, CA to Honolulu, Hawaii, lodging&meal	
The Am Legion, Chicago-Nisei Post #1183	Feb 17-18	Roundtrip airfare from San Jose, CA to Chicago, lodging & meals	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

Reporting Individual's Name
Norman Y. Mineta

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Am Traffic Safety Services Assn., Inc.	Mar 18	Airfare from Wash DC to Reno, NV to San Francisco, CA, meal	
The Associated General Contractors of America	Mar 18-19	Airfare from San Franciso, CA to Wash DC, lodging, meals	
Interstate Truckload Carriers Conference	Mar 23-26	Airfare from New Orleans, LA to Las Vegas to Dulles, lodging, meals	
Barney Frank for Congress	Mar 31-Apr 1	Roundtrip airfare Wash DC/Boston, MA, lodging, meals	
Assn of Am Railroads	Apr 6-9	Airfare from Wash DC to Miami, FL to San Franciso, CA, lodging & meals for self & guest (lodging & meals only)	
Ashland Oil	Apr 12	Roundtrip airfare San Jose, CA/Phoenix, AZ, meal	
National Tank Truck Carriers, Inc.	May 25	Airfare from Wash DC to Chicago, IL to San Jose, CA, meal	
Japanese Am Citizens League-LEC	June 22-23	Airfare from Wash DC to San Diego, CA to San Francisco, CA, lodging, meals	
National Motor Freight Traffic Assn.	Aug 6-7	Airfare from San Francisco, CA to Monterrey, CA to San Jose, CA, lodging, meals	
Ca Cable Television Assn	Aug 9-10	Roundtrip airfare San Jose, CA/ Reno, NV, lodging, meals	
Motor Vehicle Manufacturers Assn of the U.S.	Aug 21-23	Roundtrip airfare San Jose, CA/Salt Lake City, UT, lodging, meals	
University of Hawaii, Center for Japanese Studies	Aug 26-29	Airfare from San Francisco, CA to Honolulu, Hawaii, lodging & meals for self & guest (lodging & meals only)	
Western Assn of State Hwy Transportation Officials	Aug 29-Sept 3	Airfare from Honolulu to Denver, CO to San Jose, CA, Lodging, meals for self & guest (lodging & meals only)	

Reporting Individual's Name
Norman Y. Mineta

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

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NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Coloradans for David Skaggs	Sept 6-7	Airfare from San Jose, CA to Denver, CO, lodging, meals	
Am Public Works Assn.	Sept 9-10	Airfare from Fayetteville, AR to St. Louis, MO to Wash DC, lodging, meals	
International Media Partners, Inc.	Nov 11-13	Airfare from Wash DC to Monterrey, CA to San Jose, CA, lodging, meals for self & guest (lodging & meals only)	
Salomon Brothers, Inc.	Nov 14-15	Airfare from Wash DC to New York City, NY, lodging, meals	
Am Assn of State Hwy & Transportation Officials	Dec 9-10	Airfare from Wash DC to Phoenix, AZ to San JOse, CA, lodging & meals	

Reporting Individual's Name

Norman Y. Mineta

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated held on or before the date of filing during the current calendar year as an officer, director trustee partner proprietor, representative, employee or consultant of any corporation, firm partnership, or other business enterprise any nonprofit organization any labor organization or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Member	CA Advisory Committee for OPEN Society
Member	Honorary Board Member, Variety Studio, Inc. Cassette Program
Member	Advisory Board, Triton Museum of Art
Member	Board of Directors, Jr. Statesman Foundation
Member	Advisory Board, Asian American Journalists Assn.
Member	Advisory Board, Japanese American National Museum
Chairman	Board of Review, Metropolitan Washington Airports Authority
Member	Board of Directors, Tech Center of SIlicon Valley
VP	Americans for Democratic Action
Member	Board of Directors, Center for Policy Alternatives
Member	Board of Regents, Santa Clara University (CA)
Member	Advisory Committee, San Jose (CA) State University Aviation Dept.
Member	Board of Directors, American Leadership Forum, Silicon Valley Chapter

Reporting Individual's Name
Norman Y. Mineta

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Member	Board of Fellows, Santa Clara University (CA)
Member	Board of Regents, Smithsonian Institution
Member	National Advisory Board, Cal in the Capital

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 2 23
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

PATSY TAKEMOTO MINK
(Full Name)

2135 RAYBURN House office Building
(Mailing Address)
Washington D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

mc (Office Use Only) (6)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Mink + Yuen April 1990	legal fee	$2000.00	
	Hawaii Council on Legal Education for Youth August 13, 1990	honoraria	75.00	
	Northwest Regional Laboratory May 18 1990	honoraria	2500.00	
	JOHN F. MINK, Geologist	spouse, self employed income	NA	
	MINK + Yuen, Inc. Consultants	spouse, partner income Chap. 5	NA	
	George A.L. Yuen + Asso. Consultants	spouse, partner income Chap. 5	NA	
	State of Hawaii Retirement Income	retirement income	$8824.69	

For additional earned income, use next page

2715

Reporting Individual's Name
Patsy T. Mink

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	State of Hawaii Retirement Pension			unknown													monthly pension					X					
	Mink & Yuen Inc.			X									office				Equipment, bank accounts										
	George A.L. Yuen & Asso.			X									office				Equipment, bank accounts										
	Honolulu Federal Savings & Loan		X										X							X							closed

For additional assets and unearned income, use next page

2716

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MINK, Patsy T.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Jt	Alexander + Baldwin			X							X									X							
Jt	1983 State of Hawaii Airport Bond			X									X								X						
	Keystone America Income Fund			X									X							+							
S	Dean Witter Tax Exempt Securities Trust		X										X						X								
	Bank of Hawaii IRA				X						no income																
S	Bank of Hawaii KEOGH				X						no income																
S	Honolulu Federal Savings & Loan KEOGH				X						no income																
Jt	Bank of Hawaii Checking		X										X							X							
Jt	Bank of Hawaii Cert. of Dep.		X										X						X								
Jt	Bank of Hawaii Checking		X										X							X							
S	Equitable Life Assurance		+															X									
S	Equitable Life Assurance			+														X									
Jt	Central Pacific Bank Checking		X															X									closed
Jt	Central Pacific Bank Checking		X															X									
	Prudential Life Ins.		X								no income																

2717

Reporting Individual's Name
Mink, Patsy T.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

2718

Reporting Individual's Name
Patsy T. Mink

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Northwest Regional Lab		May 18 1990	Roundtrip Air Honolulu to Seattle, hotel For attendance at Conference	$704.11

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Patsy T. Mink

PART VIII – POSITIONS (only Member)

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	Public Reporter

PART IX – AGREEMENTS (only Member)

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
Jan 1987	State of Hawaii Retirement System	Retirement Benefits with Health Benefits

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☐ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Patsy T. Mink	May 14, 1991

GPO 1991 37-598 (m)

2720

PATSY T. MINK
SECOND DISTRICT, HAWAII

WASHINGTON OFFICE
2135 RAYBURN HOUSE
OFFICE BUILDING
WASHINGTON, DC 20515-1102
(202) 225-4906
FAX (202) 225-4987

DISTRICT OFFICE
HONOLULU
5104 PRINCE KUHIO FEDERAL BUILDING
P.O. BOX 50124
HONOLULU, HI 96850-4977
(808) 541-1986
FAX (808) 538-0233

Congress of the United States
House of Representatives
Washington, DC 20515-1102

✓ MC (2)

May 23, 1991

Clerk of the House
U.S. House of Representatives
Washington, D.C. 20515

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 MAY 24 AM 10:17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Dear Mr. Clerk:

Attached is a copy of the last page of the Financial Disclosure Statement which I filed on May 15, 1991 with the two check boxes filled in. When I filed it I inadvertently left them blank.

Thank you very much.

Very truly yours,

Patsy T. Mink

PATSY T. MINK
MEMBER OF CONGRESS

Reporting Individual's Name
PATSY T. MINK

PART VIII – POSITIONS (only Member)

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	Public Reporter

PART IX – AGREEMENTS (only Member)

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
Jan 1987	State of Hawaii Retirement System	Retirement Benefits with Health Benefits

RECEIVED
1991 MAY 24 AM 10 17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Patsy T. Mink	May 14, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 10:07

U.S. H.

HAND DELIVERED

John Joseph Moakley
(Full Name)

221 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State Massachusetts District 9th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U. S. Veterans Administration	Disability	876	retained
	Commonwealth of Massachusetts	Pension	6231	retained
	Ame. Fiber Manufacturers, Wash, D.C. (Jan. 25, 1990)	Speech	2,000	
	Ame. Bankers Association, Wash. D.C. (Feb. 05, 1990)	Speech	2,000	
	Campbell Soupe Inc., Wash. D.C. (Feb. 06, 1990)	Speech	2,000	
	Motor & Equipment Manufacturers, Wash, D.C (Feb. 20, 1990)	Speech	2,000	
	American Public Transit Assn, Wash, D.C. (March 12, 1990)	Speech	2,000	
	John Hancock Federal-PAC, Boston. (March 19, 1990)	Speech	2,000	
	SIA Securities Ind. of Ame., Wash, D.C (March 28, 1990)	Speech	2,000	

For additional earned income, use next page

2723

Reporting Individual's Name
Hon. John Joseph Moakley

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Fluor Daniel Corp, Inc., California (April 09, 1990)	Speech	2,000	
Baxter Health Care Corp, California (April 09, 1990)	Speech	1,000	
Recording Ind. Assn. of Ame, California (April 11, 1990)	Speech	2,000	
Motion Picture Assn. of Ame, California (April 12, 1990)	Speech	2,000	
J.G. Boswell Company, California (April 12, 1990)	Speech	2,000	
Assn. of Bank Holding Companies, Wash. D.C. (April 18, 1990)	Speech	2,000	
Footwear Ind. of Ame., Florida (April 21, 1990)	Speech	2,000	X($200)
Amusement & Music Operators, Wash. D.C. (May 01, 1990)	Speech	2,000	X
Distilled Spirits Council of U.S., Inc, Wash. D.C. (Jan. 19, 1990)	Speech	2,000	X

Reporting Individual's Name
Hon. John Joseph Moakley

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
JT	1812 Columbia Rd, Boston, Mass.						X					X							X							
JT	South Boston Savings, Boston, Mass.		X										X								X					
S	Congressional Fed. Credit Union, Wash.		X										X						X							
S	Metropolitan Mutual Life Ins., Warwick, RI		X										X						X							
S	John Hancock Ins., Boston, MA.		X										X						X							
S	Bankers Life Ins., DeMoines, Iowa		X										X						X							

For additional assets and unearned income, use next page

2725

Reporting Individual's Name
Hon. John Joseph Moakley

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	~~Century Shares~~ Boston Co Cash Mgmt Fund	X									X						X									
S	Century Shares Trust, Boston, MA.		X								X			X				X								

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Reporting Individual's Name
Hon. John Joseph Moakley

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
JT	South Boston Savings Bank, Boston, MA. (mortgage on principle residence, containing rental unit for 3 months)	1812 Columbia Rd, Boston, MA.					X		

2727

Reporting Individual's Name: Hon. John Joseph Moakley

PART VI – TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Ame. Bankers Assn., Boca R.	Feb. 15-17, 90	-Roundtrip Air Travel from Wash, D.C to Florida, 3 days food & Lodging Self and Spouse.	
Flour Corp, Baxter Health Care,	April ↓	Roundtrip Air Travel from Wash, D.C. to California, 5 days	
Recording Industry, J.G. Boswell &	09 –	food & lodging Self only.	
Co., and Motion Picture Industry	↓ April		
Cal (5) Companies are in California)	13, 1990		

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

* (Continuation Sheet # 2)

Reporting Individual's Name: John Joseph Moakley

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Footwear Industries		April 20-22, 1990	Roundtrip Air Travel from Wash. D.C. to Palm Beach, Florida 2 days food & lodging.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Hon. John Joseph Moakley

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☒

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John Joseph Moakley	5/13/91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 11: 28
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

SUSAN MOLINARI
(Full Name)

35 Monroe Place
(Mailing Address)

Staten Island, New York 10314

Filer Status	[X] Member of the U.S. House of Representatives — State: New York, District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc (Office Use Only) 5

In all sections, please type or print clearly in black ink.

N.B.: Spouse information excluded pursuant to [redacted] Appendix 6, Section 102(e)(2)(A)

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	New York City Council	salary	$20,588.98	

For additional earned income, use next page

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Reporting Individual's Name

SUSAN MOLINARI

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	FIRST NATIONWIDE BANK		X										X						X								
	CITIBANK, N.A.		X										X							X							

For additional assets and unearned income, use next page

2732

Reporting Individual's Name

SUSAN MOLINARI

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name

SUSAN MOLINARI

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
N.Y. ASS'N OF WOMAN OFFICE HOLDERS (Speech)		May 14,1990	Air travel, food, Newark to Albany, New York to Washington, D.C.	
PAXON for CONGRESS COMMITTEE (Panelist)		May 17-18, 1990	Roundtrip air travel, food, lodging, Washington, D.C. to Buffalo, New York.	
WOMAN'S CAMPAIGN FUND LEADERSHIP 2,000 WEEKEND (Speech)		July 13-14, 1990	Food, lodging, one-way Rail, Washington, D.C. to Princeton, N.J.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
SUSAN MOLINARI

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
BOARD MEMBER	MARCH OF DIMES
BOARD MEMBER	RICHMOND HOSPICE
BOARD MEMBER	ADELPHI ACADEMY

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Susan Molinari	May 11, 1991

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:26
U.S. House of Representatives

HAND DELIVERED

Alan B. Mollohan
(Full Name)

701 Ninth Street
(Mailing Address)

Fairmont, West Virginia 26554

Filer Status	[X] Member of the U.S. House of Representatives	State: WV District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Philip Morris (1-16-90)	Honorarium	$1,000	
	Paul Magliochetti Associates (3-14-90)	Honorarium	$2,000	
	National Rural Water Association (5-8-90)	Honorarium	$2,000	
	Hyjek & Fix, Inc. (8-3-90)	Honorarium	$1,000	
	Avco Corporation (8-21-90)	Honorarium	$2,000	
	District 2-Marine Engineers Beneficial Association (7-14-90)	Honorarium	$2,000	
	R. Duffy Wall & Associates (12-12-90)	Honorarium	$1,000	
	Textron, Inc. (12-17-90)	Honorarium	$2,000	
	LTV Aerospace & Defense Co. (12-18-90)	Honorarium	$2,000	
	Harris Corporation (12-19-90)	Honorarium	$1,000	

For additional earned income, use next page

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Reporting Individual's Name
Alan B. Mollohan

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
United Technologies Corporation/ Pratt & Whitney (12-17-90)	Honorarium	$1,000	
IMO Industries (12-18-90)	Honorarium	$2,000	

Reporting Individual's Name
Alan B. Mollohan

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	CB & T Finaicial Corp.			X								X							X									
S	Rochester & Pittsburgh Coal			X								X							X									
S	Franklin Federal Tax Free Income Fund			X										X						X								
S	Merrill Lynch Lifetime Emerging Growth					X						X								X								
S	M.L. Municipal Bond Fund Class A					X						X								X								
S	Fairmont Waterworks Bonds				X									X						X								

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Alan B. Mollohan

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	West Virginia School Board Authority Bonds			x									x							x							
S	Inter Mountain Power Agency Bonds		x										x						x								
S	West Virginia Water Development Bonds		x										x						x								
S	West Virginia State Hospital Finance Bonds		x										x						x								
S	Nuveen Municipal Adv. Fund		x										x						x								
S	CMA Money Fund		x										x					x									
S	City of Fairmont West Virginia Sewer Rev. Bonds			x									x							x							
S	Kanawha County West Virginia Building Commission Bonds			x									x							x							
S	Ins. Hospital Revenue Bonds			x									x						x								
S	West Virginia Hospital Finance Authority Bonds				x								x								x						
JT	Wright Patman Credit Union		x										x					x									
	Wright Patman Credit Union		x										x					x									
DC	United National Bank (Glenville WV)		x										x					x									

Reporting Individual's Name
Alan B. Mollohan

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Putnam Global Growth Fund E.F. Hutton - Indiv. Retirement Acct.		x								x			x					x								
	Putnam Global Growth Fund E.F. Hutton - Indiv. Retirement Acct.		x								x			x					x								
S	1/5 int. coal, oil & gas 6.5 acres, Linn Lick, Center Dist., Gilmer Co, WV	x																								
S	1/5 int. coal, oil & gas 27 acres, Linn Lick, Center Dist., Gilmer Co. WV	x																								
S	3.33% int oil & gas 35 acres Bull Fork DeKalb Dist, Gilmer Co, WV		x														royalty		x							
S	5/32 int. oil & gas 242 acres NS Kanawha Glenville Dist., Gilmer Co., WV			x													royalty				x					
	American Bar Association Retirement Plan [1]			x							x		x													
	1/ ABA Master Keogh Profit Sharing Plan Growth Equity SA 100		x																							
	Money Market Guarantee		x																							
	Aggressive Equity SA 150		x																							
	Balanced Fund SA 170			x																						

Reporting Individual's Name: Alan B. Mollohan

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	1 West Virginia State Hospital Bond		X		6/13/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	United National Bank Glenville, WV	Personal Loan		X					
	LaRosa Construction Company	Construction loan (paid in full 6/29/90)		X					

Reporting Individual's Name
Alan B. Mollohan

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Textron, Inc. (fact-finding tour)	Dec 16-18 1990	Roundtrip air travel from Wash. DC to Dallas, TX, ~~2 days meals and lodging~~	
Harris Corporation (fact-finding tour)	Dec 18-19	Air travel from Wash. DC to Melbourne, FL, 1 night ~~lodging and meals~~	
United Technologies/Pratt & Whitney (fact-finding tour)	Dec 19	Ground transportation from Melbourne to West Palm Beach, FL ~~and air travel from WPB to Wash. DC~~	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

Reporting Individual's Name
Alan B. Mollohan

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Alan Mollohan

DATE (Month, Day, Year): May 15, 1991

GPO 1991 37-598 (m)

APPROPRIATIONS COMMITTEE
SUBCOMMITTEE ON COMMERCE, JUSTICE, STATE & JUDICIARY
SUBCOMMITTEE ON VA, HUD & INDEPENDENT AGENCIES

CONGRESSIONAL STEEL CAUCUS EXECUTIVE COMMITTEE
CONGRESSIONAL COAL GROUP

ALAN B. MOLLOHAN
1ST DISTRICT, WEST VIRGINIA

Congress of the United States
House of Representatives
Washington, D.C. 20515

229 CANNON HOB
WASHINGTON DC 20515
(202) 225-4172

DISTRICT OFFICES
P O BOX 1400
ROOM 209 POST OFFICE BUILDING
CLARKSBURG WEST VIRGINIA 26301
(304) 623-4422

ROOM 102 CITY COUNTY COMPLEX
FAIRMONT WEST VIRGINIA 26554
(304) 363-3356

ROOM 1117 FEDERAL BUILDING
PARKERSBURG WEST VIRGINIA 26101
(304) 428-0493

ROOM 316 FEDERAL BUILDING
WHEELING WEST VIRGINIA 26003
(304) 232-5390

June 6, 1991

Honorable Donnald K. Anderson
Clerk
Office of Records and Registration
U.S. House of Representatives
Washington, DC 20515-6612

MC

RECEIVED
1991 JUN 10 AM 7:58
U.S. HOUSE OF REPRESENTATIVES

Dear Donn:

This is written in response to a letter I received from the Committee on Standards of Official Conduct dated May 23, 1991 which concerns my 1990 Financial Disclosure Statement.

In their letter, the Committee noted several bonds and land interests (Parts II and III - Assets and "Unearned" Income) which appear on my 1990 Statement that were not listed on my 1989 Statement. All of these particular assets, as well as almost all the other bonds and land interests shown, are held by my spouse, Barbara Whiting Mollohan. These came into her possession by family inheritance with the passing of her father, Andrew E. Whiting. They have been slowly distributed as Mr. Whiting's estate has been settled.

I do hope that this information provides an adequate explanation concerning my family's holdings.

Most sincerely,

Alan Mollohan

Alan B. Mollohan

ABM:ap

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 1:09

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Congressman Gillespie V. Montgomery
(Full Name)

2184 Rayburn Building
(Mailing Address)
Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Mississippi District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Mississippi National Guard (not subject to outside earned income limit)	Retirement	$27,415.92	
	The Washington Post (Dec. 17, 1990)	Article	$ 200.00	

For additional earned income, use next page

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Reporting Individual's Name

Cong. Gillespie V. Montgomery

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman Federal Credit Union				X								X								X						
	Trustmark Nat'l Bank, Jackson, Ms. (Formerly Unifirst)		X										X						X								
	Home Federal Saving & Loan Meridian, Ms.		X										X							X							
	Home Federal Savings & Loan stock		X								X									X							
	Eastover Bank Savings, Jackson, Ms.		X										X						X								
	Eastover Bank Stock		X									None						X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Cong. Gillespie V. Montgomery

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Nuveen Bonds		X										X						X							
Mississippi Housing Finance Corp Bonds		X										X						X							
Mississippi State Hospital Equipment Bonds		X										X						X							
Simpson Co., Ms. Bonds		X										X						X							
Lowndes County, Ms. Bonds		X										X						X							
Mississippi Highway Bonds.		X										X						X							
Laurel, Mississippi Bonds		X										X						X							
Meridian, Ms. F.G. Riley Hospital Bonds			X									X							X						
Meridian Municipal Separate School District Bonds		X										X							X						
Merrill Lynch Investments Jackson, Ms.		X								X	X								X						
Grenada Sunburst Systems Stock Grenada, Ms.		X								X								X							
Oil Interest & Timberland Clarke County (40 acres)			X													Royalty& sale of timber						X			
First Trust Advantage Mississippi Series		X										X						X							
Indianola Income Property,L.P. 1 unit-commercial rental property ~~Indianola, Mississippi~~			X								X								X						
Indianola Income Property II,L.P. ~~1 unit-commercial leasing property~~ Indianola, Ms.		X									X								X						

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Cong. Gillespie V. Montgomery

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Meridian Duplex, 3904 Country Club Drive, Meridian, Mississippi				X								X								X						
Parkside, 10508 Montrose, #104 Bethesda, Maryland					X							X										X				
The Court (½ Interest) 212 Justice Court, N.W., Washington, D.C.						X						X									X					
Cattle			X														Sale					X				
Deposit Guaranty Bank, Jackson Ms.			X										X						X							
Mississippi General Obligation Port Bonds		X											X						X							
Fund Alabama Inc.		X									X							X								
Sanderson Farms stock Laurel, Ms.		X									X							X								
The Blackstone Target Term Trust stock (New York)		X									X								X							
Carlyle Real Estate Limited Partnership XIV, Chicago, Ill.		X											X					X								
Stern Agee & Leach CEF Government Fund, Birmingham, Alabama			X								X									X						
Timberland (38 acres) Neshoba Co. Ms.		X										none						X								
Timberland (½ interest 775 acres) Attala Co. Ms.						X						X					(use of land-hunting)		X							
Timberland (½ interest 122 acres) Lauderdale Co., Ms.				X								none						X								
Timberland 80 acres Webster Co Ms.				X								none						X								

Reporting Individual's Name: Cong.Gillespie V. Montgomery

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Timberland 40 acres Calhoun Co. Ms.			X									none						X								
Irvine Sensors Stock		X										none						X								
Diplomat (1unit limited partnership, residential rental property Hinds Co., Ms.)				X									X					X								
Freeport McMoRan Oil & Gas Co. (formerly Freeport McMoRan Energy Partners) New Orleans, La.			X								X							X								
Bancorp of Ms.,Inc.stock			X								X							X								
Mobile Nat'l Corp. (Alabama) stock			X									none						X								
Torchmark Corp. Stock			X								X							X								
Meridian, Ms. School General Obligation Bond			X										X					X								
Big "B" Inc. Stock			X								X							X								
Delta Income Property,L.P.(1 unit leasing warehouse,Indianola, Ms.				X									X					X								
120 N. Congress, L.P.(1 unit commercial rental&leasing property- Jackson, Ms.)				X									X					X								
Crusade Partners, L.P.(1 unit leasing of hotel,Panama Beach,Fla)				X								none						X								
B.B.&T. Financial Corp stock				X							X							X								

Reporting Individual's Name
Cong. Gillespie V. Montgomery

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Mississippi State GEn. Obligation Bond		X									none						X								
	Citizens Nat'l Bank, Meridian		X								X							X								

Reporting Individual's Name
Cong. Gillespie V. Montgomery

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Mississippi Hospital Equipment Bond		X		4-2-90	X						
	Cattle		X		7 times from 3/5/90 to 11/1/90	X						
	Timber (Clarke County)		X		8-2-90		X					
	Ms. State Gen. Obligation Bond	X			10-19-90	X						
	Crusade Partners, L.P. (1 unit limited partnership, leasing of hotel, Panama Beach, Florida)	X			12-4-90		X					

(CONTINUED NEXT PAGE)

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Pat Dixson Realtor, 1425 27th Street NW Wash., D.C.**(loan satisfied in 1990)	Mortgage on The Court, 212 Justice Ct., N.W., Wash., D.C.	X						
	Indianola Income Property, L.P. P. O. Box 22655, Jackson, Ms.	Business Loan		X					
	Indianola Income Property II, L.P. P.O. Box 22655, Jackson, Ms.	" "		X					
	Delta Income Property, L.P. P.O. Box 22655, Jackson, Ms.	" "		X					
	120 N. Congress, L.P. P.O. Box 22655, Jackson, Ms.	" "		X					

(CONTINUED NEXT PAGE)

Reporting Individual's Name
Cong. Gillespie V. Montgomery

PART IV—TRANSACTIONS - (CONTINUED)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Ms. Housing Finance Corp. Bond		X		1-1-90	X						

PART V—LIABILITIES - (CONTINUED)

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Crusade Partners, L.P. P.O. Box 22655, Jackson, Ms.	Business Loan		X					

Reporting Individual's Name
Cong. Gillespie V. Montgomery

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corp. 1660 L Street,N.W., Wash.D.C.	Civil War Educational Video Tapes	$120

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
D'Ibrell Brothers, Inc. Danville, Virginia	Feb.19,'90	Roundtrip air travel-private plane from Washington D.C.to Danville, Va.(luncheon dedication for Dan Daniel Park)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Cong. Gillespie V. Montgomery

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Barry M. Goldwater Scholarship & Excellence in Education Foundation Washington, D.C.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA ☒

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Gillespie V. Montgomery	May 15th 1991

GPO 1991 37-598 (in)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 49

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Jim Moody
(Full Name)

1019 Longworth Bldg
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S House of Representatives	State: WI District: 05	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

mc 9 (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	See Attachment A			

For additional earned income, use next page

2755

Reporting Individual's Name

Honorable Jim Moody

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	2413-15 N. Fratney, Milwaukee, WI			X																							
	2723 N. Farwell, Milwaukee, WI					X																					
	4240-42 N. 68th St., Milwaukee, WI				X																						
	907 G St., S.E., Washington, D.C.					X																					
	Rose Hall, Jamaica				X																						
	Chicago Corporation	X																									

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Honorable Jim Moody

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Kemper Tax Exempt Money Market Act.			x																						
	Kemper Money Market Act.		x																							
	Kemper Enhanced Securities Number 6		x																							
	Kemper Financial Companies CD		x																							
	U.S. Treasury Stripes		x																							
	U.S. Double Pay Trust Number 3		x																							
	Individual Retirement Fund			x																						x
	Blunt, Ellis & Loewi Money Market			x							x			x				x								
	AT&T Stock		x								x								x							
	Nicholas Mutual Fund			x							x			x					x							x
	Heartland Mutual Fund				x						x			x						x						
	Mills Place Limited Partnership				x																					
	Faulk & Company Investment Counseling				x																					
	Shearson Lehman Mutual Fund		x								x			x					x							
	University National Bank Savings Act.			x									x						x							

Reporting Individual's Name
Honorable Jim Moody

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Individual Retirement Fund	x			2-8-90	x						
	Nicholas Mutural Fund		x		4-9-90	x						
	Nicholas Mutual Fund	x			6-6-90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Continental Savings & Loan, Milwaukee, WI	Mortgage on 2723 N. Farwell,Milw,WI		x					
	Continental Savings & Loan, Milwaukee, WI	Mortgage on 4240-42 N. 68th, Milw,WI			x				
	Guaranty Savings & Loan, Milwaukee, WI	Mortgage on 2413-15 N. Fratney Milw, WI		x					
	Maryland National Mortgage Corporation	Mortgage on 907 G St., S.E., D.C.				x			

Reporting Individual's Name

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
None		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
See Attachment F				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

2759

Reporting Individual's Name
Jim Moody

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board Member	American Legation Museum in Morocco
Board Member	Dumbarton Concerts, Inc
Board Member	Inter-American Parlimentary Group on Population and Development

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
	NONE	

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jim Moody	5/15/91

GPO 1991 37-598 (m)

ATTACHMENT "A"
PART I--EARNED INCOME
FINANCIAL DISCLOSURE STATEMENT FOR 1990

1990 HONORARIA

DATE	SOURCE	AMOUNT	DISPOSITION
03/11	American College of Emergency Physicians	$2000.00	None
03/13	Brookings Institution	$ 400.00	None
03/30	Medical Group Mgmt Assoc	$2000.00	None
04/23	American College of Surgeons	$2000.00	None
04/30	Frito-Lay	$ 500.00	None
05/07	National Structured Settlement Trade Association	$2000.00	None
05/08	National Assn of Temporary Services	$1000.00	None
07/23	MCI	$1000.00	None
08/24	Greater New York Hospital Assoc	$2000.00	None
10/02	Security Industry Assoc	$2000.00	None
10/09	Brookings Institute	$ 400.00	None
11/01	Connell Rice	$2000.00	None
11/16	Nationwide Insurance	$2000.00	None
11/26	United Methodist	$ 50.00	None
12/07	Chicago Board of Trade	$ 750.00	None
12/07	Chicago Mercantile Exchange	$ 750.00	None

ATTACHMENT "F"
PART VII--REIMBURSEMENTS
FINANCIAL DISCLOSURE STATEMENT FOR 1990

SOURCE	BRIEF DESCRIPTION
Aspen Institute	Roundtrip airfare and lodging for conference on Soviet Union in Montego Bay, Jamaica 1/10 thru 1/13
American College of Emergency Physicians	Roundtrip airfare and lodging for speech in Tucson, AZ; 3/11 -3/12
Wisconsin Conference of Churches	Roundtrip airfare and lodging with human rights monitors in El Salvador; 3/23 thru 3/25
Africa Leadership Forum	Roundtrip airfare and lodging for African economic development and human rights conference in Paris, France; 4/17 thru 4/18
American College of Surgeons	Roundtrip airfare for speech in Chicago, Il; 4/23/90
Frito-Lay	Roundtrip airfare for speech in Dallas, TX; 4/30/90
National Structured Settlement Trade Assoc	Roundtrip airfare and lodging for speech in Palm Springs, CA 5/6 thru 5/7
Human Rights Project	Roundtrip airfare and lodging for meetings with El Salvador government and opposition negotiators, in Caracas, Venezuela 5/25 thru 5/28
National Democratic Institute for International Affairs	Roundtrip airfare and lodging for official observation of elections in Bulgaria; 6/3 thru 6/12
Greater New York Hospital Assoc	Roundtrip airfare for urban hospital visits in New York City 8/24/90
Connell Rice Company	Roundtrip airfare and lodging for speech in Westfield, NJ; 11/1/90
Nationwide Insurance	Roundtrip airfare for speech in Columbus, Ohio; 11/16/90
Vatan Society of Baku, USSR	Roundtrip airfare and lodging for meetings with business,government and opposition leaders in Azerbaijan and Ngorno-Karabakh; 11/23 thru 12/2

Chicago Board of Trade	Roundtrip airfare for meetings with trading exchange officials in Chicago, IL; 12/7

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 49
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

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HAND DELIVERED

(Office Use Only)

1991 MAY 31 PM 4:53
U.S. HOUSE OF REPRESENTATIVES

Jim Moody
(Full Name)

1019 Longworth Bldg
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: WI District: 05	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	See Attachment A			

For additional earned income, use next page

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Reporting Individual's Name

Honorable Jim Moody

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

S, DC, JT	BLOCK A Asset and/or Income Source (Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).)	BLOCK B Valuation of Asset: Category of Value (X) A: none (or less than $1,001)	B: $1,001 - $15,000	C: $15,001 - $50,000	D: $50,001 - $100,000	E: $100,001 - $250,000	F: $250,001 - $500,000	G: $500,001 - $1,000,000	H: over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I: none (or less than $201)	II: $201 - $1,000	III: $1,001 - $2,500	IV: $2,501 - $5,000	V: $5,001 - $15,000	VI: $15,001 - $50,000	VII: $50,001 - $100,000	VIII: $100,001 - $1,000,000	IX: over $1,000,000	Block D Transaction (X)
Examples: S	ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
✓	2413-15 N. Fratney, Milwaukee, WI			X						jm		X					jm			X						
✓	2723 N. Farwell, Milwaukee, WI					X						X					jm				X					
	4240-42 N. 68th St., Milwaukee, WI				X					jm		X									X					
✓	907 G St., S.E., Washington, D.C.					X				jm		X					jm			X						
	Rose Hall, Jamaica (non-income prop)				X																					
✓	Chicago Corporation	X								jm	X						jm	X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Honorable Jim Moody

BLOCK A Asset and/or income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Kemper Tax Exempt Money Market Act.			X						jm	X						jm		X								
	Kemper Money Market Act.		X							jm	X								X								
	Kemper Enhanced Securities Number 6		X							jm	X								X								
	Kemper Financial Companies CD		X							jm	X								X								
	U.S. Treasury Stripes		X							jm	X								X								
	U.S. Double Pay Trust Number 3		X							jm	X								X								
	Individual Retirement Fund Blunt, Ellis + Loewi Not IRA Bitterly			X						jm	X								X								X
	Blunt, Ellis & Loewi Money Market			X							X			X				X									
	AT&T Stock		X								X								X								
	Nicholas Mutual Fund			X							X			X					X								X
	Heartland Mutual Fund				X						X			X						X							
	Mills Place Limited Partnership				X																						
	Faulk & Company Investment Counseling				X																						
	Shearson Lehman Mutual Fund		X								X			X					X								
	University National Bank Savings Act.			X									X						X								

Reporting Individual's Name
Honorable Jim Moody

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Individual Retirement Fund Blunt, Ellis, & Lowe not self directed	x			2-8-90	x						
	Nicholas Mutural Fund		x		4-9-90	x						
	Nicholas Mutual Fund	x			6-6-90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Continental Savings & Loan, Milwaukee, WI	Mortgage on 2723 N. Farwell,Milw,WI		x					
	Continental Savings & Loan, Milwaukee, WI	Mortgage on 4240-42 N. 68th, Milw,WI			x				
	Guaranty Savings & Loan, Milwaukee, WI	Mortgage on 2413-15 N. Fratney Milw, WI		x					
	Maryland National Mortgage Corporation	Mortgage on 907 G St., S.E., D.C.				x			

Reporting Individual's Name

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
None		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
See Attachment F				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C. 7342)

Reporting Individual's Name

Jim Moody

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board Member	American Legation Museum in Morocco
Board Member	Dumbarton Concerts, Inc
Board Member	Inter-American Parlimentary Group on Population and Development

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
	NONE	

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jim Moody	5/15/91

ATTACHMENT "A"
PART I--EARNED INCOME
FINANCIAL DISCLOSURE STATEMENT FOR 1990

1990 HONORARIA

DATE	SOURCE	AMOUNT	DISPOSITION
03/11	American College of Emergency Physicians	$2000.00	None
03/13	Brookings Institution	$ 400.00	None
03/30	Medical Group Mgmt Assoc	$2000.00	None
04/23	American College of Surgeons	$2000.00	None
04/30	Frito-Lay	$ 500.00	None
05/07	National Structured Settlement Trade Association	$2000.00	None
05/08	National Assn of Temporary Services	$1000.00	None
07/23	MCI	$1000.00	None
08/24	Greater New York Hospital Assoc	$2000.00	None
10/02	Security Industry Assoc	$2000.00	None
10/09	Brookings Institute	$ 400.00	None
11/01	Connell Rice	$2000.00	None
11/16	Nationwide Insurance	$2000.00	None
11/26	United Methodist	$ 50.00	None
12/07	Chicago Board of Trade	$ 750.00	None
12/07	Chicago Mercantile Exchange	$ 750.00	None

ATTACHMENT "F"
PART VII--REIMBURSEMENTS
FINANCIAL DISCLOSURE STATEMENT FOR 1990

SOURCE	BRIEF DESCRIPTION
Aspen Institute	Roundtrip airfare and lodging for conference on Soviet Union in Montego Bay, Jamaica 1/10 thru 1/13
American College of Emergency Physicians	Roundtrip airfare and lodging for speech in Tucson, AZ; 3/11 -3/12
Wisconsin Conference of Churches	Roundtrip airfare and lodging with human rights monitors in El Salvador; 3/23 thru 3/25
Africa Leadership Forum	Roundtrip airfare and lodging for African economic development and human rights conference in Paris, France; 4/17 thru 4/18
American College of Surgeons	Roundtrip airfare for speech in Chicago, Il; 4/23/90
Frito-Lay	Roundtrip airfare for speech in Dallas, TX; 4/30/90
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Human Rights Project	Roundtrip airfare and lodging for meetings with El Salvador, government and opposition negotiators, in Caracas, Venezuela 5/25 thru 5/28
National Democratic Institute for International Affairs	Roundtrip airfare and lodging for official observation of elections in Bulgaria; 6/3 thru 6/12
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Connell Rice Company	Roundtrip airfare and lodging for speech in Westfield, NJ; 11/1/90
Nationwide Insurance	Roundtrip airfare for speech in Columbus, Ohio; 11/16/90
Vatan Society of Baku, USSR	Roundtrip airfare and lodging for meetings with business,government and opposition leaders in Azerbaijan and Ngorno-Karabakh; 11/25 thru 12/1

JM

Chicago Board of Trade	Roundtrip airfare for meetings with trading exchange officials in Chicago, IL; 12/7

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 9 00
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 12

2773

CARLOS J. MOORHEAD
(Full Name)

2346 RAYBURN HOUSE OFFICE BUILDING, WASHINGTON, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U S House of Representatives	State CALIFORNIA District 22	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. TELEPHONE ASSOCIATION (1/25/90) Palm SpringsCA	SPEECH	~~$1,000.00~~	
	NATIONAL ASSN. OF BROADCASTERS 1/24/90 Palm Springs, Ca.	"	$2,000.00	
	KEYSTONE ENERGY FUTURES (3/30/90) Palm Springs, Ca.	"	$ 500.00	
	NATIONAL CABLE TV ASSOCIATION (1/23/90) Beverly Hills, Ca.	"	$1,500.00	
	CBEMA/PROPERTY RIGHTS COMM. (1/25/90) ~~Washington, D.C.~~	"	$1,000.00	
	HOME SHOPPING NETWORK (3/12/90) ~~Clearwater, Florida~~	"	$2,000.00	
	JIM WALTER CORPORATION Tampa, Florida (3/15/90)	"	$2,000.00	
	PFIZER Clifton, New Jersey (5/11/90)	"	$1,000.00	
	NATIONAL ASSN. OF BROADCASTERS 4/16 /90 Atlanta, Georgia	"	$2,000.00	
	CALIFORNIA WINE INSTITUTE (5/16/90) Washington,DC	"	$1,000.00	

For additional earned income, use next page

Reporting Individual's Name
CARLOS J. MOORHEAD

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
NATIONAL CABLE TV ASSN. 7/17/90) Atlanta, Georgia	Speech	$1,500.00	
NATIONAL ASSN.INDEPENDENT TELEVISION STATIONS Washington, D.C. (6/29/90)	"	500.00	
CALIFORNIA STATE LEGISLATURE RETIREMENT	Pension	$2,416.98	
THE CONGRESSIONAL INSTITUTE, Inc. Princeton,NJ 2/22-24/1990, attended with spouse	Conference	$1067.20	

Reporting Individual's Name

CARLOS J. MOORHEAD

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	INVESTMENT COMPANY OF AMERICA Mutual Fund		X								X								X								
	SOLOMON INVESTMENT, formerly LEHMAN Mutual Fund		X								X								X								
	KEYSTONE S 3 Mutual Fund		X								X								X								
	SW GAS Common Stock		X								X							X									
	IMPERIAL SAVINGS	X											X									X					
	GLENDALE FEDERAL SAVINGS & LOAN					X							X									X					

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CARLOS J. MOORHEAD

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	CRESTAR BANK, McLEAN, VIRGINIA		X																X								
	FIDELITY FED. SAVINGS AND LOAN					X							X														
	JAMES ANGELOPOULOUS NOTE & TRUST DEED 9131 Gainford St.Downey,CA 90240				X								X									X					
	WELLS FARGO					X							X									X					
	FIRST VIRGINIA BANK, McLEAN		X																X								
	DEAN WITTER IRA ACCOUNT Liquid Asset Fund		X										X						X								
	DEAN WITTER KEOGH ACCOUNT Money purchased DTD			X							X									X							
	TOWN HOUSE,43941 Afton Terrace, Ashburn Village, Virginia					X						X										X					
	TOWN HOUSE,,43943 Afton Terrace, Ashburn Village, Virginia					X						X										X					
S	Lots 115-116, Borego Springs Unit, Frying pan Road, Borego, CA		X																								
	WAKEFIELD & ASSOCIATES, Real Estate Groups (see attached information)			X							X								X								

Financial Disclosure A-2(a)

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CARLOS J.MOORHEAD

WAKEFIELD & ASSOCIATES GROUP IV — 12 SHARES - 11 MEMBERS — DECEMBER 31, 1990

	ASSETS	LIABILITIES
CASH IN BANK		
Checking	B	
Savings	B	
HELTON PROPERTY - 20 acres		
Hill property (forfeiture) Estimated Market Value of land	C	
Cost - $6,958.42	C	
Contracts Receivable		
Kingsbury - $150/monthly including 7% interest		
ASSETS	C	
LIABILITIES		-0-
NET WORTH		C

1/12 of Net Worth: B

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CARLOS J. MOORHEAD

WAKEFIELD & ASSOCIATES GROUP XI — 14 MEMBERS — DECEMBER 31, 1990

	ASSETS	LIABILITIES
CASH IN BANK		
Checking	A	
Savings	B	
ACCOUNTS RECEIVABLE	B	
NOTES RECEIVABLE	B	
PELLERITI PROPERTY - 32 acres, Pend Oreille County - Sold		
Contract Receivable - Wells - $175.00 monthly inc. 8.5% interest	- B -	
FELTON ESTATE PROPERTY - Sold		
Contract Receivable - Bailey - Contract Sold	- 0 -	
BOYLES PROPERTY - 55 acres, Pend Oreille County		
Cost - $17,553.00 Timber is cut - Estimated market value of land	C	
PETERS PROPERTY - 40 acres, Pend Oreille County - Sold		
Contract Receivable - Armbruster etal - Pd in full.	- 0 -	
HADDAD/VAN MATRE PROPERTY - 20 acres remaining (Heutmaker Property)		
Heutmaker Property - Cost $8,869.00 - Estimated market value of land	B	
Contract Receivable - Sharp - Contract sold		
ASSETS	D	
LIABILITIES		-0-
NET WORTH		D

1/14 of Net Worth: B

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WILSON INVESTMENT GROUP XXXV 20 MEMBERS CARLOS J.MOORHEAD DECEMBER 31, 1990

		ASSETS	LIABILITIES
CASH IN BANK	Checking Account	B	
	Savings (Money Market Acct)	B	
PETTY CASH	Apartments - E. 17018 Sprague	A	
ACCOUNTS RECEIVABLE		B	
PROPERTIES PURCHASED			
N. 12-16-18 UNIVERSITY - Commercial Property		F	
Estimated Market Value			
Cost - $347,614.90 Scheduled monthly income - $4,200.00			
Contract Payable - Cady - $700.00 monthly inc. 8% interest			C
Mortgage Payable - Barnyak - $2,150.00 monthly inc. 11% interest			D
W. 235-239 MAIN - Commercial Property		E	
Estimated Market Value			
Cost - $128,641.72			
Mortgage Payable - Caputo - $1,000.00 monthly inc. 10% interest			D
E. 17018 SPRAGUE - 9 Unit Apartment		E	
Estimated Market Value			
Cost - $111,157.44 - Scheduled monthly income $1,850.00			
Contract Payable - Wright - $600.00 monthly inc. 9% interest			C
Mortgage Payable - Barnyak - $400.00 monthly inc. 11% interest			C
Mortgage Payable - F & M Bank - $453.09 monthly inc. 11.5% interest			C
E. 943 AUGUSTA - 8 Unit Apartment		E	
Estimated Market Value			
Cost - $123,802.34 - Scheduled monthly income $1,635.00			
Mortgage Payable - Old Stone Mtg. Corp. - $612.53 monthly inc. 8.5% interest and reserve account for taxes			C
Contract Payable - Barnyak - $560.00 monthly inc. 11% interest			D
Reserve Acct Balance - Old Stone Mtg. Corp.		A	

	ASSETS	LIABILITIES
PROPERTIES PURCHASED - continued		
E. 1721 EVERETT - Rental House		
Estimated Market Value	C	
Cost - $40,662.96		
Mortgage Payable - Fleet Funding - $162.00 monthly inc. 7% interest		B
Reserve Account - Fleet Funding - for taxes and insurance	A	
ELOIKA LAKE ROAD - Acreage - Sold		
Contract Receivable - Lyon & House - $300.00 monthly inc 10% interest	C	
MISCELLANEOUS FURNITURE - Acquired with rentals	A	
ACCRUED TAXES PAYABLE		
4th Quarter Industrial Insurance and Unemployment Taxes - E. 17018 Sprague		A
4th Quarter Industrial Insurance and Unemployment Taxes - E. 943 Augusta		A
ASSETS	G	
LIABILITIES		F
NET WORTH		G
TOTAL LIABILITIES AND NET WORTH		G

NOTE: Values of the various properties are estimated market values without adjustment for depreciation taken in this and prior years.

MOORHEAD
7.220 % of Net Worth - C

Reporting Individual's Name
CARLOS J. MOORHEAD

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1 000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name
CARLOS J. MOORHEAD

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [NONE]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
	US TELEPHONE	Jan.11/13/90	2 nights hotel and food/Ritz Carlton,RanchoMirage,CA Member and spouse	
	KEYSTONE ENERGY FUTURES	Jan.14/15/90	2 nights lodging /food/Hyatt Grand Champions Resort,PalmSprings,CA Member and spouse	
	HOME SHOPPING NETWORK	March 15/17/90	1 ni. Hyatt Regency,Westshort,Tampa, Florida; Round trip air fare from DC to Tampa/Clearwater,Florida	
	PFIZER	March 19/90	Roundtrip Airfare from DC National to Clifton, New Jersey	
	NATIONAL CABLE TV ASSN.	March 31/ April 2/90	Round trip DC to Atlanta, 2 nights lodging and food Ritz Carlton,Atlanta for Member and spouse	

See attached info.

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

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CARLOS J. MOORHEAD

Part VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION LODGING,FOOD, ENTERTAINMENT

SOURCE	DATE	BRIEF DESCRIPTION (ITINERARY AND NATURE OF EXPENSE)
NATL. CABLE TV. ASSN.	MAY 20, 1990	Round trip airfare DC to Atlanta 1 ni, lodging and food, MARRIOTT MARQUIS

Reporting Individual's Name
CARLOS J. MOORHEAD

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C. app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app 6, § 104 and 18 U S.C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Carlos J. Moorhead	8 May 91

GPO 1991 37-598 (m)

2784

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 7:22
U.S. HOUSE OF REPRESENTATIVES

JAMES P. MORAN, JR.
(Full Name)

203 WEST UNION TERRACE
(Mailing Address)

ALEXANDRIA, VIRGINIA 22301

HAND DELIVERED

MC (Office Use Only)

6

Filer Status	[X] Member of the U.S. House of Representatives — State: VIRGINIA District: 8th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CITY OF ALEXANDRIA, VIRGINIA	SALARY	$25,000	
	HUMAN RESOURCES RESEARCH ORG., ALEXANDRIA, VA	CONSULTING FEE	$1425	
	NORTHERN VIRGINIA TRANSPORTATION COMMISSION	COMMISSIONER FEE	$700	
	MERCK & CO. (FEB. 1990)	SPEECH	$2000	
	A. G. EDWARDS & SONS, INC.	SPOUSE SALARY	NA	

For additional earned income, use next page

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Reporting Individual's Name
JAMES A. MORAN, JR

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			162 Main Street, Dover, Delaware				X						X								X							
	WAL-MART STOCK			X											X					X								X
	INTERNATIONAL BUSINESS MACHINE STOCK			X																								
	A. G. EDWARDS & SONS, INC. STOCK		X									X			X							X						X
	McDONALD'S CORP. STOCK			X																								
	CRESTAR BANK ACCOUNT			X										X						X								
	BANK of ALEXANDRIA ACCOUNT			X										X						X								

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: JAMES P. MORAN, JR.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income											BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
BURKE & HERBERT BANK ACCOUNT		X											X						X								
CENTENNIAL MONEY MARKET FUND				X							X										X						

Reporting Individual's Name
JAMES P. MORAN, JR.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	I.R.A. ACCOUNT, A.G. EDWARDS & SONS, INC.		X		2-90				X			
	TEXACO CORP., STOCK	X	X		8-13-90 12-3-90	X						
	A.G. EDWARDS & SONS, INC. STOCK		X		12-3-90	X						
	WAL-MART CORP., STOCK	X	X		8-21-90 12-3-90	X						
	INTERNATIONAL BUSINESS MACHINE STOCK	X			2-8-90	X						
	MCDONALD'S CORP. STOCK	X			2-14-90	X						
JT	RESIDENCE, 104 SENATE CIRCLE, KING GEORGE, VIRGINIA	X			2-25-91				X			

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	MARINE MIDLAND BANK	MORTGAGE ON 104 SENATE CIRCLE KING GEORGE, VIRGINIA				X			

Reporting Individual's Name
JAMES P. MORAN, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
DEL RAY DEMOCRATIC CLUB		1-5-90	LODGING AND TICKETS, SELF AND SPOUSE, INAUGURATION OF L. DOUGLAS WILDER AS GOVERNOR OF VIRGINIA	
DEL RAY DEMOCRATIC CLUB		10-8-90	ROUNDTRIP AIR FARE WASHINGTON, D.C. TO GROTON, CONN., FOR SPOUSE FOR SUB DEDICATION	
DEL RAY DEMOCRATIC CLUB		1-25-90	TICKETS, MEETING	
DEL RAY DEMOCRATIC CLUB		2-1-90 2-2-90	TICKETS, MEETING	
DEL RAY DEMOCRATIC CLUB		2-19-90 2-27-90 5-24-90	TICKETS, MEETING	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
JAMES P. MORAN, JR.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James P. Moran	May 14, 1991

GPO: 1991 37-[illegible] (es)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 MAY 20 AM 8:01
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

INSIDE MAIL

MC

(Office Use Only) 6

JAMES P. MORAN, JR.
(Full Name)

203 WEST UNION TERRACE
(Mailing Address)

ALEXANDRIA, VIRGINIA 22301

Filer Status	[X] Member of the U.S. House of Representatives — State: VIRGINIA District: 8th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CITY OF ALEXANDRIA, VIRGINIA	SALARY	$25,000	
	HUMAN RESOURCES RESEARCH ORG., ALEXANDRIA, VA.	CONSULTING FEE	$1425	
	NORTHERN VIRGINIA TRANSPORTATION COMMISSION	COMMISSIONER FEE	$700	
	MERCK & CO. (FEB. 1990)	SPEECH	$2000	
	A.G. EDWARDS & SONS, INC.	SPOUSE SALARY	NA	

For additional earned income, use next page

2791

Reporting Individual's Name
JAMES A. MORAN, JR

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	WAL-MART STOCK	X												X					X								X
	INTERNATIONAL BUSINESS MACHINE STOCK		X																								
	A. G. EDWARDS & SONS, INC. STOCK	X									X			X							X						X
	McDONALD'S CORP. STOCK		X																								
	CRESTAR BANK ACCOUNT		X										X						X								
	BANK of ALEXANDRIA ACCOUNT		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: JAMES P. MORAN, JR.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	BURKE & HERBERT BANK ACCOUNT		X										X						X								
	CENTENNIAL MONEY MARKET FUND			X							X										X						

2793

Reporting Individual's Name
JAMES P. MORAN, JR.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	I.R.A. ACCOUNT, A.G. EDWARDS & SONS, INC.		X		2-90				X			
	TEXACO CORP., STOCK	X	X		8-13-90 12-3-90	X						
	A.G. EDWARDS & SONS, INC. STOCK		X		12-3-90	X						
	WAL-MART CORP., STOCK	X	X		8-21-90 12-3-90	X						
	INTERNATIONAL BUSINESS MACHINE STOCK	X			2-8-90	X						
	McDONALD'S CORP. STOCK	X			2-14-90	X						
JT	RESIDENCE, 104 SENATE CIRCLE, KING GEORGE VIRGINIA	X			2-25-91				X			

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	MARINE MIDLAND BANK	MORTGAGE ON 104 SENATE CIRCLE KING GEORGE, VIRGINIA				X			

2794

Reporting Individual's Name
JAMES P. MORAN, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
DEL RAY DEMOCRATIC CLUB		1-5-90	LODGING AND TICKETS, SELF AND SPOUSE, INAUGURATION OF L. DOUGLAS WILDER AS GOVERNOR OF VIRGINIA	
DEL RAY DEMOCRATIC CLUB		10-8-90	ROUNDTRIP AIR FROM WASHINGTON, D.C. TO GROTON, CONN., FOR SPOUSE FOR SUB DEDICATION	
DEL RAY DEMOCRATIC CLUB		1-29-90	TICKETS, MEETING	
DEL RAY DEMOCRATIC CLUB		2-1-90 2-2-90	TICKETS MEETING	
DEL RAY DEMOCRATIC CLUB		2-14-90 2-27-90 5-24-90	TICKETS, MEETING	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
JAMES P. MORAN, JR.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James P. Moran	May 14, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 9:49
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Constance A. Morella
(Full Name)

1024 Longworth Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	☑ Member of the U.S. House of Representatives — State Maryland District 8	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The American University, Washington, D.C.	Spouse Salary	NA	
	Hewes, Morella, Gelband & Lamberton, P.C., Wash., D.C.	Spouse Salary	NA	
	U.S. Merit Systems Protection Board Management Conference (Oct. 29, 1990)	Spouse-Honorarium	$600-	

For additional earned income, use next page

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Reporting Individual's Name

Constance A. Morella

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Common Stock, Occidental Petroleum		X								X							X									
JT	" " , COMSAT		X								X							X									
JT	Van Kampen Merritt Tax Exempt Income Trust		X										X						X								
	Consumer United Deferred Annuities		X										X							X							
S	" " " "		X										X							X							
	Maryland National Bank : IRA			X									X							X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Constance A. Morella

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Maryland National Bank: IRA			X									X							X							
	MD State Deferred Compensation			X									X							X							
	Wright Patman Credit Union			X									X									X					
JT	Standard Federal Savings Bank, Balt, MD			X									X							X							
JT	Citizens Bank, Bethesda, MD		X										X							X							
JT	Bank of Baltimore, MD		X										X							X							
S	TIAA-CREF Pension Plan							X					X						X								
	Annuity Accumulation																										
JT	U.S. Savings Bonds		X										X						X								
JT	607 Twinbrook Pkwy, Rockville, MD					X						X										X					
JT	200 Park Terrace Dr, #237, Stoneham, MA					X						X							X								
	(condo. apt.)																										
	MD State Employees Credit Union, Towson		X										X							X							
JT	Madison Bank of MD, Bethesda, MD			X									X								X						

Reporting Individual's Name
Constance A. Morella

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	~~Under $1,001~~	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90				X				
JT	H/A- COM Common Stock		X		1.30.90	X							

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2800

Reporting Individual's Name
Constance A. Morella

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☑

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Human Rights Project (national			
election observer, Nicaragua)	Feb. 16-20	RT coach air travel from Wash. D.C. to Nicaragua, food & lodging	
Wayne County Rep. Cmte, Ohio (speech)	March 10	RT coach air travel to Cleveland, Ohio (self & spouse)	
Aspen Institute Conference on			
Southern Africa (participant)	Apr. 11-16	RT coach air travel from Wash. D.C. to Bermuda, food & lodging (self & spouse)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

PART VII "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

Reporting Individual's Name: Constance A. Morella

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Date(s)	Brief Description	
National Association of College & University Business Officers Annual Conference (Keynote Address)	July 13-16	RT air travel Wash, D.C. to Hawaii, food & lodging (self & spouse)	
Business & Professional Women Annual Convention (Keynote address)	July 23-24	RT coach air travel from Wash, D.C. to Charlotte, N.C., overnight lodging	
Aspen Institute Conference: "Eastern Europe" (participant)	August 26-31	One way coach air travel from Prague to Wash., D.C., food & lodging (self & spouse)	
The Rene DuBos Center Conference (delivered paper & panelist)	November 17-19	RT coach air fare from Wash., D.C. to Orlando, Fla., food & lodging	
Human Rights Project (national pre-election observer - Guatemala)	Dec. 5-12	RT coach air travel from Wash., D.C. to Guatemala, food & lodging	

28062

Reporting Individual's Name
Constance A. Morella

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Capitol College, Laurel, Maryland
Trustee	Trinity College, Washington, D.C.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☑

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Constance A. Morella	May 15, 1991

GPO 1991 37-598 (m)

CONSTANCE A. MORELLA
8TH DISTRICT, MARYLAND

COMMITTEES
POST OFFICE AND CIVIL SERVICE
SCIENCE, SPACE, AND TECHNOLOGY
SELECT COMMITTEE ON AGING

HAND DELIVERED

Congress of the United States
House of Representatives

WASHINGTON OFFICE
1024 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-6341

DISTRICT OFFICE
11141 GEORGIA AVENUE
SUITE 302
WHEATON, MD 20902
(301) 946-8801

May 23,1991

MC (1)

1991 MAY 23 PM 5:09
U.S. HOUSE OF REPRESENTATIVES

The Honorable Louis Stokes
Chairman,Committee on Standards
of Official Conduct
U.S. House of Representatives
Suite HT-2,U.S. Capitol
Washington,D.C. 20515

Re: Amendment to Annual Financial
Disclosure Statement - 1990

Dear Mr. Chairman:

This letter amends Parts II and III of my Financial Disclosure Statement for calendar year 1990 filed on 15 May,1991.

Add to Parts II and III - Assets and "Unearned"Income the following:

Block A (Asset)
Spouse - Stock,Hewes,Morella,Gelband & Lamberton,a Professional Corp.

Block B (Valuation)
Category C

Block C (Income)
Type of Income: Dividend
Category 1 - None

Also,in Parts II and III - Assets, the JT Van Kampen Merritt Tax Exempt Income Trust disclosed in 1990 is the same as the IM-IT (Insured Municipal Income Trust),N.Y. reported in 1989. The valuation, type of income, and category of income disclosed in 1990 for this asset remains the same as in 1989 as there were no transactions for this reported asset in 1990 over 1989.

Very truly yours,

Constance A. Morella

Constance A. Morella
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 9 26

HAND DELIVERED

SID MORRISON
(Full Name)

1434 Longworth, Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S House of Representatives	State. Washington District 4	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1 000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Gibbons Pharmacy, Toppenish, Wa.	Spouse hourly wages	NA	
	Citizens For Morrison, Yakima, Wa.	" " "	"	
	Seimens, Inc, New York (Feb. 8, 1990)	Speech/Honoraria	$1,500	X
	Natn. Agricultural Chemicals Assn, Wash. D.C. (Feb 9, 1990)	" "	250	X
	Harvest States Cooperative, St. Paul, Minn. (Mar. 28, 1990)	" "	1,000	X
	Council of Scientific Society Presidents, Wash D.C (May 11, 1990)	" "	250	X
	American Nuclear Energy Council, Wash. D.C. (June, 1, 1990)	" "	1,000	X
	The Washington Caucus, Wash. D.C. (Sept 18, 1990)	" "	500	X
	National Restaurant Assoc, Wash. D.C. (Nov. 13, 1990)	" "	500	X

For additional earned income, use next page

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Reporting Individual's Name
Sid Morrison

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Farm Credit Services (loan prepayment account)		X										X						X								monthly prepayments on real estate loan
JT	Pacificorp (Stock)		X								X								X								
JT	Liquid Reserves (money market account)			X									X								X						Periodic deposits and withdrawals
JT	Winthrop Properties (housing limited partnership)		X								X								X								
JT	Desert Aire Assoc. (limited partnership)		X								X							X									
JT	Capital Guardian Trust (IRA)			X										X						X							Added $2250 in April, 1990

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) #1

Reporting Individual's Name: Sid Morrison

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Aldus Corporation (Stock)		X								X							X									
JT	Pfizer, Inc. (Stock)		X								X							X									
	Washington State Employees (Public) Retirement System			X													Vested, but inactive										

Financial Disclosure A-2(a)

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Reporting Individual's Name: Sid Morrison

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) #2

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	FARM PROPERTIES LISTED BELOW ARE MORTGAGED TO COVER LIABILITIES REPORTED IN SECTION V. THEY HAVE LITTLE, IF ANY, NET VALUE. THE VALUE SHOWN IS "TRUE AND FAIR" VALUE AS DETERMINED BY THE COUNTY ASSESSOR.																									
	YAKIMA COUNTY PARCEL # ACREAGE																									
JT	201103-13001 38.20			X								X														
JT	201110-31405 8.6			X								X														
JT	201110-31410 9.77			X								X														
JT	201103-23001 own undivided 2/3 + 38% of 1/3 31.27				X							X														
JT	201110-24001 50% of undivided 1/3 40.			X								X														
JT	201110-13001 undivided 1/3 20.		X									X														
JT	201110-21001 undivided 1/3 + 46% of 1/3 30.				X							X														
JT	201110-22004 undivided 1/2 8.02		X									X														
	'90 TOTAL INCOME, ALL ABOVE																		X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) # 3

Reporting Individual's Name: Sid Morrison

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	FARM PROPERTIES LISTED BELOW ARE OWNED BY THE SID MORRISON FAMILY LIMITED PARTNERSHIP. THEY ARE MORTGAGED (SEE SECTION 5) AND HAVE LITTLE, IF ANY, NET VALUE. SID + MARCELLA MORRISON OWN 9% AS GENERAL PARTNERS AND 69.64% AS LIMITED PARTNERS.																									
	YAKIMA COUNTY PARCEL # — ACREAGE																									
JT	201110-42001-9 — 79.9					X						X														
JT	201110-13003 — 10.			X								X														
JT	201110-13002 — 10.			X								X														
JT	201110-23004-6 — 28.65				X							X														
JT	201110-31413-9 — 15.56			X								X														
	'90 TOTAL INCOME, ALL ABOVE →																			X						

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Reporting Individual's Name: Sid Morrison

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) # 4

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	OPEN LAND, JEFFERSON COUNTY, OREGON S½ NW¼ SEC 32 T10S R2 EWM 80 ACRES (½)		X															X								
JT	OPEN LAND, ISLAND COUNTY, WASHINGTON N½ SW¼ N¼ S34 T29 N R3 EWM ¼ of 20 Acres			X														X								

Reporting Individual's Name
Sid Morrison

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	None, except those reported in Part II + III											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	Seattle First National Bank, Yakima, Wa.	Farm operating loan (Morrison Fruit Co.)							X
JT	Farm Credit Services, Yakima, Wa.	" " " " " "							X

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Reporting Individual's Name
Sid Morrison

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	
International Apple Institute		June 17-18, 90	Roundtrip Air from Wash. D.C. to Nashville, dinner, overnight lodging	
Congressional Institute		Feb. 22-24, 90	Roundtrip Train from Wash. D.C. to Princeton, N.J. 2 nights lodging 3 days food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
Sid Morrison

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [ ]

Date	Parties To	Terms of Agreement
1967 - 1979	Washington State Public Employees Retirement System	I am vested, on inactive status

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C. app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Sid Morrison	May 15, 1991

GPO 1991 37-598 (m)

SID MORRISON
4TH DISTRICT WASHINGTON

COMMITTEE ON AGRICULTURE
SUBCOMMITTEES
FORESTS, FAMILY FARMS AND ENERGY
WHEAT, SOYBEANS AND FEED GRAINS
DEPARTMENT OPERATIONS, RESEARCH AND FOREIGN AGRICULTURE

COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY
SUBCOMMITTEES
ENERGY
ENVIRONMENT

HOUSE SELECT COMMITTEE ON HUNGER

1991 MAY 22 PM 3:20

U.S. HOUSE OF REPRESENTATIVES

Congress of the United States
House of Representatives
Washington, DC 20515

HAND DELIVERED

WASHINGTON OFFICE
1434 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5816

DISTRICT OFFICES
212 EAST E STREET
YAKIMA, WA 98901
(509) 575-5891

MORRIS BUILDING, SUITE 210
23 SOUTH WENATCHEE
WENATCHEE, WA 98801
(509) 662-4294

3311 WEST CLEARWATER, SUITE 105
KENNEWICK, WA 99336
(509) 783-0310

WASHINGTON STATE TOLL FREE
1-800-572-8601

May 22, 1991

Committee on Standards of
Official Conduct
Suite HT-2, Capitol
Washington, D.C. 20515

MC ✓

(1)

Dear Colleagues:

On May 21, you wrote suggesting that a stock holding listing last year in my Financial Disclosure Statement was not continued for 1990, either as an asset or disposed of by transaction. You are right, but I am not wrong.

The stock in question is my joint ownership with my wife of Morrison Fruit Company stock, a farm operating family corporation. I don't mind listing the stock, which I still own, but its value no longer meets the listing threshold requirement and it has never produced any income.

I look forward to the day when this stock again has value and can reappear on my report.

Thanks for your assistance and the courtesy of your staff.

Sincerely,

Sid Morrison

Sid Morrison

SM:kg

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 10

HAND DELIVERED

Robert J. Mrazek
(Full Name)

306 Cannon Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. Navy Disability Pension		$4,152	
	Siemens Corp., Washington, D.C. (1-30-90)	Speech	1,500	
	Hazeltine Corp., Greenlawn, N.Y. (2-2-90)	Speech	1,000	
	NHK Enterprises, Washington, DC (2-5-90)	Speech	1,000	
	NEWSDAY (2-9-90)	Article	250	
	WASHINGTON POST (3-15-90)	Article	200	
	American Public Transit Assn., NY,NY (4-17-90)	Speech	1,000	
	AT&T, Washington, D.C. (4-19-90)	Speech	2,000	
	Connell Co., Westfield, N.J. (5-4-90)	Speech	2,000	
	Patrick Media Group, Washington, D.C. (5-15-90)	Speech	250	

For additional earned income, use next page

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Reporting Individual's Name

Robert J. Mrazek

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Outdoor Advertising Assn., Washington, DC (5-15-90)	Speech	$ 750	
American Trucking Assn., Washington, DC (5-16-90)	Speech	,000	
The Casden Co., Los Angeles, Ca. (5-21-90)	Speech	2,000	
Irvine Corp., Irvine, Ca. (5-21-90)	Speech	1,000	
Itel Rail, Washington, DC (5-24-90)	Speech	1,000	
Delaware Ostego Corp., Cooperstown, NY (6-2-90)	Speech	2,000	
Textron, Austin, Texas (6-8-90)	Speech	2,000	
WETA, Washington, DC (9-12-90)	TV Appearance	200	
Hill & Knowlton, Washington, DC (9-24-90)	Speech	1,000	
Connell Co., Westfield, NJ (11-13-90)	Speech	2,000	
Parsons Brinckerhoff, NY,NY (12-13-90)	Speech	500	

Reporting Individual's Name

Robert J. Mrazek

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X									X
	George Wash Credit Union Accounts			X									X								X							
	182 Main Street, Dover, Delaware				X							X									X							
	131 Centershore Road Centerport, NY						X																					
	Monhegan Island, Maine (Vacation Home)						X					X											X					
	301 Constitution Ave., NW Washington, D.C.							X																				
	Mortgage holder on 449 Jericho Tpke, Huntington, NY ($350,000 promissory note due 6/91)						X						X											X				

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert J. Mrazek

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	25% of equity interest in Douglas and Chamberlain Corp., whose assets consisted of contributions from the shareholders. The sole purpose of the corporation was to purchase one piece of real property, Pierce Island, Bahamas.				X							X							X								
	134 acres of improved land in Rockingham County, Va. Small farm house, barn and several outbuildings.					X																					

Reporting Individual's Name

Robert J. Mrazek

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	A. Keene Bowie, M.D., Upper Marlboro, Md.	Mortgage on 301 Constitution Avenue, NE, Washington, DC				X			
	Wright Patman Federal Congressional Credit Union, Washington, DC	Personal Loan	X						
	Wright Patman Federal Congressional Credit Union, Washington, DC	Home Equity Loan				X			
	Chemical Bank, N.Y., N.Y.	Personal Loan	X						
	Citibank, N.A., N.Y., N.Y.	Home Equity Loan			X				

NOTE: Part V-LIABILITIES Continued on next page

Reporting Individual's Name

Robert J. Mrazek

PART V—LIABILITIES - CONTINUED

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Peoples Heritage Bank, Lewiston, Maine	Mortgage on Monhegan Island, Maine vacation property				X			
	John & Evelyn Beling, Arlington, Va.	Mortgage on Rockingham County, Va. property				X			
	Martin & Sally Rosenblum, Valley Stream, NY	Second mortgage on Rockingham Counoty, Va. property			X				
	Chevy Chase Federal Savings Bank, Md.	Personal Loan	X						

Reporting Individual's Name

Robert J. Mrazek

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Connell Company	5-4-90	Roundtrip air travel from Washington, D.C. to Newark, N.J.	
Connell Company	10-13-90	One-way air travel from Washington, D.C. to Newark, N.J.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Robert J. Mrazek

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
President	Douglas and Chamberlain, Ltd.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert J. Mrazek	15 May 1991

GPO 1991 37-598 (m)

2822

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 AM 7:55

AUSTIN J. MURPHY
(Full Name)

2210 RAYBURN BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515

INSIDE MAIL

Filer Status	[X] Member of the U.S. House of Representatives — State: PENNSYLVANIA District: 22	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Mon Valley Hospital, Monongahela, PA 15063 (1990)	Spouse Wages	NA	
	Burger King, Miami FL 1/3/90	Speech and Conference	2,000.00	
	Retail Merchants Ass'n, NY 1/11 - 14/ 91	Speeches -Honorarium	2,000.00	
	Industrial Truck Ass'n, D.C. 3/1/90	Speech - Honorarium	2,000.00	
	National Restaurant Ass'n, D.C. 9/27/90	Speech - Honorarium	1,000.00	
	Industrial Truck Ass'n, Williamsburg,VA 9/13-14/90	Speeches - Honorarium	2,000.00	
	S & A Corp. D.C. 10/30/90	Speech - Honorarium	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name

AUSTIN J. MURPHY

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)										
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Community Bank, Carmichaels, PA		X										X						X								
JT	Mon Valley Credit Union, PA	X											X					X									
JT	Allegheny Power Stock		X								X									X							
JT	American Electric Power Stock		X								X									X							
JT	Bell Atlantic		X								X							X									
JT	Bell South		X								X								X								

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hunt in J. Murphy

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Southwest Bell Stock		x								x							x									
JT	Nynex Stock		x								x							x									
JT	Pacific Telesis Stock		x								x							x									
JT	USWest Stock		x								x								x								
JT	Commonwealth Edison Stock		x								x									x							
JT	Philadelphia Electric		x								x								x								
JT	631 Speers Ave., Speers, PA			x									x	x							x					x	Agreement Sale
JT	448 Fourth St., Monongahela, PA			x										x					x							x	Agreememt Sale
JT	7212 Girard Drive, Las Vegas, NE				x							x									x						x
JT	R.D.# 4 Carroll Township, Monongahela				x							x								x							
JT	PA State Bonds			x									x							x							
JT	Philadelphia School Bonds			x									x						x								
JT	Lancaster, PA bonds			x									x						x								
JT	Insured PA Municipal Trust			x									x						x								
JT	Sun Bank		x										x					x									

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: AUSTIN J. MURPHY

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	1st Federal Monongahela-Spouse IRA		X																								
	Prudential IRA		X																								
	Perpetual Savings Bank IRA		X																								
Jt	Sun Bank		X										X					X									
Jt	Congressional Credit Union		X										X						X								
	Commonwealth of Pennsylvania																Pension				X						

Reporting Individual's Name

AUSTIN J. MURPHY

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
Jt.	Installment Sale 448 4th Street, Monongahela, PA		X		1985-1995	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
Jt.	Charleroi Federal Savings and Loan	Mortgage on 7212 Girard, Las Vegas		X					

28027

Reporting Individual's Name

AUSTIN J. MURPHY

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D.C. to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Industrial Truck Association	9/13-14/90	Food and Lodging - 1 night Roundtrip Williamsburg-DC National Capitol Bldg. Self	
Miami Chamber of Commerce	1/11-14/90	Roundtrip Air DC-Miami Food and Lodging Self	
Retail Merchants Association	1/15-16/90	Roundtrip Air DC - New York Food and Lodging Self	
U.S. Sugar Association	2/8/90	Roundtrip Air DC - West Palm Self 1 day to tour refinery	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

2828

Reporting Individual's Name

AUSTIN J. MURPHY

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE XXX

Positions	Name of Organization
	NONE

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE XXX

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No X NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No X NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Austin J. Murphy	May 14, 1991

GPO 1991 37-598 (m)

INSIDE MAIL

AUSTIN J. MURPHY
22D DISTRICT, PENNSYLVANIA

COMMITTEES
EDUCATION AND LABOR
LABOR STANDARDS, CHAIRMAN
LABOR-MANAGEMENT RELATIONS
HEALTH AND SAFETY
INTERIOR AND INSULAR AFFAIRS
ENERGY AND ENVIRONMENT
NATIONAL PARKS AND PUBLIC LANDS
FOREIGN AFFAIRS
INTERNATIONAL ECONOMIC POLICY AND TRADE

Congress of the United States
House of Representatives

2210 Rayburn Building
Washington, DC 20515
(202) 225-4665

DISTRICT OFFICES
ALLEGHENY COUNTY
(412) 221-2129
BEAVER COUNTY
1801C BRODHEAD ROAD
ALIQUIPPA, PA 15001
(412) 375-1199
FAYETTE COUNTY
45-51 EAST PENN STREET
UNIONTOWN PA 15401
(412) 438-1490
GREENE COUNTY
COUNTY OFFICE BLDG.
93 HIGH STREET
WAYNESBURG PA 15370
(412) 627-7611
WASHINGTON COUNTY
96 NORTH MAIN STREET
WASHINGTON, PA 15301
(412) 228-2777
306 FALLOWFIELD AVENUE
CHARLEROI, PA 15022
(412) 489-4217

May 24, 1991

1

MC

RECEIVED
1991 MAY 28 AM 7:33
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Honorable Louis Stokes
Chairman
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, DC 20515

Dear Mr. Chairman:

In answer to your letter of May 21, 1991, and the attachment thereto, please be advised that under Part II of the form you sumbitted to Members' indicates that assests exceeding $1000 in value must be diclosed. Neither my Disney or Cypress Minerals stock exeeds that limit. In addition thereto, the instructions state that unearned income of $200 or more must be reported. Neither the Disney or Cypress Minerals stock exceeded that in total income for the year 1990, or anytime before that.

The property at 448 Fourth Street, Monongahela, PA, was Deeded to my daughter and her husband, Colleen & Steve Arnowitz on August 12, 1988 and recorded in the Recorder of Deeds office for Washington County, PA on December 29, 1988.

I trust this answers your inquiry.

Very truly yours,

Austin J. Murphy

AUSTIN J. MURPHY
Member of Congress

AJM:mac

Enclosure

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 9:54
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

JOHN P. MURTHA, JR.
(Full Name)

109 COLGATE AVENUE
(Mailing Address)

JOHNSTOWN, PA. 15905

Filer Status	[X] Member of the U.S. House of Representatives — State: PA, District: 12TH	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	WASTE MANAGEMENT (JAN. 9, 1990)	SPEECH	2,000	
	WHITMAN CORPORATION (JAN. 10, 1990)	SPEECH	2,000	
	AMERICAN AMMUNITION MFG. (JAN. 11, 1990)	SPEECH	2,000	
	LONG ISLAND FORUM FOR TECHNOLOGY (FEB. 23, 1990)	SPEECH	2,000	
	PORT OF OAKLAND (MARCH 2, 1990)	SPEECH	2,000	
	GENERAL PUBLIC UTILITIES (MARCH 13, 1990)	SPEECH	2,000	
	STEEL MANUFACTURERS ASSN. (MAY 1, 1990)	SPEECH	2,000	
	AMERICAN IRON & STEEL (MAY 31, 1990)	SPEECH	2,000	
	PRICE WATERHOUSE (JUNE 12, 1990)	BRIEFING	2,000	
	SHIPBUILDERS COUNCIL (OCT. 2, 1990)	SPEECH	2,000	

For additional earned income, use next page

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Reporting Individual's Name

JOHN P. MURTHA, JR.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
STEEL SERVICE CTR. INSTITUTE (OCT. 3, 1990)	SPEECH	850	
AEROSPACE INDUSTRIES ASSN. (NOV. 16, 1990)	SPEECH	2,000	
DUFFY, WALL LAW FIRM (DEC. 4, 1990)	SPEECH	2,000	
PHILIP MORRIS (DEC. 6, 1990)	SPEECH	1,000	
TOTAL		25,850	

Reporting Individual's Name

JOHN P. MURTHA, JR.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X									X
	Examples: George Wash. Credit Union Accounts			X									X								X							
	Examples: 182 Main Street, Dover, Delaware				X							X								X								
JT	CENWEST NATIONAL BANK			X									X						X									
	WESBANCO, INC.	X									X								X									
JT	CHARLES SCHWAB		X								X							X										

For additional assets and unearned income, use next page

Reporting Individual's Name

JOHN P. MURTHA, JR.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
JOHN P. MURTHA, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Waste Management Inc. (speech)	Jan 9-10,90	Roundtrip Air between Wash.D.C. & Chicago,Ill,1 night lodging,food	
Crown American Corporation(speech)	Jan 14, 90	Roundtrip Air between Wash.D.C. & New York City, dinner, self&spouse	
Easter Seal Society (speech)	Feb 10, 90	Roundtrip Air between Wash.D.C. & Wilkes-Barre, PA, dinner	
Long Island Forum for Technology (speech)	Feb 23, 90	Roundtrip Air between Wash.D.C. & New York City, breakfast	
Port of Oakland (speech)	March 1-3 90	Roundtrip Air between Wash.D.C. & SanFrancisco, food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Continued on next page

Part VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment Continuation

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)
The Greater Pittston Friendly Sons of St. Patrick (speech)	March 17, 90	Roundtrip Air between Wash.D.C. & Wilkes-Barre, PA, dinner
Grumman Corporation (speech)	March 23, 90	Airfare - Wash.D.C., Long Island NY, Latrobe, PA, food
American Iron & Steel Institute (speech)	May 31-June 1, 90	Airfare Johnstown, PA, New York City, Allentown, PA, 1 night lodging, food, self and spouse
Aerospace Industries (speech)	Nov 15-17, 90	Airfare Johnstown, PA, Phoenix, Arizona, Wash.D.C., lodging, food, self and spouse

Reporting Individual's Name
JOHN P. MURTHA, JR.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [ ] NA [X]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
X	MAY 1, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:57

HAND DELIVERED

(Office Use Only) 8

(Full Name)	John Thomas Myers
(Mailing Address)	2372 Rayburn HOB Washington, D.C. 20515
Filer Status	[X] Member of the U.S. House of Representatives — State IN District 7 ; [ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15) ; [ ] Amendment ; [ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Ocean Spray Cranberries (Mar 1, 1990)	Speech	2,000.00	
	Industrial Committee (Mar 1, 1990)	Speech	2,000.00	
	The Irvine Co (Feb 22, 1990)	Speech	1,000.00	
	Committee For Const of SSC (June 12, 1990)	Speech	1,000.00	
	Massachusetts Mutual Life Ins (June 14, 1990)	Speech	2,000.00	
	Greater Pittsburg Chamber Commerce (June 14,1990)	Speech	1,000.00	
	Pirelli Cable Corp (Mar 30, 1990)	Speech	2,000.00	
	Flur Daniel Inc (May 18, 1990)	Speech	1,000.00	
	CA Municipal Utilities Assn (July 5, 1990)	Speech	2,000.00	
	SMUD (Sept 24, 1990)	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name
John Thomas Myers

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
General Atomic	(Dec 14, 1990)	Speech	2,000.00	
BIPAC	(Aug 18, 1990)	Speech	500.00	
Tobacco Institute	(Aug 18, 1990)	Speech	2,000.00	
Bank of Western Indiana		Director's Fee	300.00	

Reporting Individual's Name

John Thomas Myers

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X									X					
	182 Main Street, Dover, Delaware				X							X								X							
JT	American States Ins		X								X							X									
JT	Bank of Western Indiana Stock						X				X											X					
S	Covington Service Corp		X								X							X									
S	The Fountain Trust Co			X							X									X							
JT	GTE (Pref)		X								X							X									
JT	IBM		X								X							X									

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John Thomas Myers

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	ICM		X								X								X								
JT	Indiana Energy Inc			X							X									X							
JT	Motel 6		X								X								X								
JT	Southern Indiana Gas & Elec			X							X									X							
JT	TRW Inc			X							X									X							
JT	Wal Mart Stores		X								X									X							
JT	Wm Wrigley Co		X								X								X								
JT	Bank of Western Indiana CD's					X							X									X					
	FOUNTAIN County Indiana Farm						X										Grain						X				
S	Oil Royalties Illinois & Oklahoma wells		X														Royalties	X									
S	Bank of Western Indiana IRA's			X									X							X							
	American Mutual Ins		X										X						X								
	Carruthers, Estate of (Spouse)			X									X	X					X								

Reporting Individual's Name
John Thomas Myers

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Motel 6		X		12/31/90	X						
JT	Indiana Energy Inc - Common Stock	X			Dividend Re Invest	X						
JT	Southern Indiana Gas & Elec	X			Div Re Invest	X						
JT	Wm Wrigley Co	X			Div Re Invest	X						
JT	Wal Mart Store	X			1/10/90	X						

*Re Invest - 4 times a year various dates

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Bank of Western Indiana paid off								

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Reporting Individual's Name
John Thomas Myers

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
The Irvine Co	2/22/90	Air fare from Washington-Los Angeles & Lodging	
Industrial Committee	2/24-25/90	Lodging - San Diego	
Industrial Committee	2/26/90	Air fare from San Diego-Washington	
Pirelli Corp	3/30-4/2/90	Round trip air fare & lodging Washington-Denver,CO	
Committee For Const of SSC	5/18-19/90	Round trip air fare & lodging Washington-Dallas,TX	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
John Thomas Myers

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

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NONE ☐

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

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Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse	
Massachusetts Mutual Life Ins	6/7/90	One night lodging, Indianapolis, Indiana	
Cal Municipal Untilities	5/21-22/90	Round trip air fare and one night lodging Washington-Sacramento, Cal	
SMUD	6/7-8/90	Round trip air fare and one night lodging Washington Sacramento, Calif	
Indiana Bell	12/7-9/90	Round trip air fare and two nights lodging Washington Chicago, with spouse	
General Atomic	12/12-16/90	Round trip air fare and lodging Washington-San Diego, Cal with spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
John Thomas Myers

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Director	Bank of Western Indiana

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John Thomas Myers	May 15, 1991

GPO 1991 37-598 (m)

2845

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 2 58

DAVID R. NAGLE
(Full Name)

214 Cannon H.O.B.
(Mailing Address)

Washington DC 20515

Filer Status	[X] Member of the U S House of Representatives	State: IA District: 3	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

HAND DELIVERED

mc

(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	David R. Naqle, P.C.	fees earned in years prior to entering Congress, law practice	$ 5,415.00	

For additional earned income, use next page

2846

Reporting Individual's Name
DAVID R. NAGLE

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	DPS Associates			X							X									X							
Jt	Statesman Bank		X										X					X									
Jt	Wright-Patman Credit Union		X										X					X									
Jt	Peoples Bank & Trust Co.			~~X~~ X									X							X							
	Life Investors		X										X					X									
S	Real Estate, Poweshiek Co., IA			X										X					X								X

For additional assets and unearned income, use next page

2847

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: DAVID R. NAGLE

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Real Estate, Chickasaw Co., IA			X																						
	David R. Nagle, P.C.			X										X									X			X
	Pensions, profit sharing plans					X																				

Reporting Individual's Name
DAVID R. NAGLE

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10 12-90			X				
S	Real Estate, Poweshiek Co., Iowa		X		6/11/90		X					
	David R. Nagle, P.C. *				12/21/90		X					
	*Professional corporation dissolved 12/21/90, ~~assets turned over to sole shareholder~~, Dave Nagle											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

2849

Reporting Individual's Name
DAVID R. NAGLE

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [XX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
International Center for Development Policy Wash. D.C.	5/4-5/6 1990	Roundtrip Air Travel: Wash. DC to El Salvador, 3 days food & Lodging	
International Center for Development Policy, Wash, D.C.	5/25-6/1 1990	Roundtrip Air Travel Wash DC to Moscow, USSR, 7 days food & Lodging	
Democratic Congressional Campaign Committee	7/28-7/29 1990	Roundtrip Air Travel Wash DC to Orlando, FL 1 night food & Lodging	
Jim Jontz for Congress Committee Indiana Democratic Party	9/20-9/21 1990	Roundtrip Air Travel Waterloo to Indianapolis 1 night food & Lodging	
Scott Wolfe for Congress Committee	9/23-9/24	Roundtrip Air Travel Wash DC to Providence, RI 1 Night food & Lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
DAVID R. NAGLE

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President and sole	David R. Nagle, P.C. (dissolved Dec., 1990)
shareholder	

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☒ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
David Nagle	5/15/91

GPO 1991 37-598 (m)

DAVE NAGLE
3D DISTRICT IOWA

214 CANNON HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-3301

AT LARGE DEMOCRATIC WHIP

COMMITTEES

AGRICULTURE
SCIENCE, SPACE AND TECHNOLOGY

DISTRICT OFFICES

524 WASHINGTON ST
WATERLOO IA 50701
(319) 234-3623
(800) 772-1748

102 S CLINTON ST
ROOM 505
IOWA CITY IA 52240
(319) 351-0789

18 EAST MAIN ST
ROOM 160
MARSHALLTOWN IA 50158
(515) 752-6701

Congress of the United States
House of Representatives
Washington, DC 20515

INSIDE MAIL

June 11, 1991

1991 JUN 25 AM 7:36
OFFICE OF RECORDS AND REGISTRATION
U.S. HOUSE OF REPRESENTATIVES

1
MC

Clerk
U.S. House of Representatives
Office of Records and Registration
1036 L.H.O.B.
Washington DC 20515

Dear Sir:

Re: Financial Disclosure Statement
Filed May 15, 1991

Please consider this letter my amendment of the above statement, per your request of May 21, 1991.

My original statement should be amended by adding to Part II, Assets, the explanation that there is only one pension or profit sharing plan, which is The David R. Nagle Profit Sharing Plan held at Peoples Bank & Trust Company, Waterloo, Iowa. Income is Category IV. The plan's assets are invested in CDs of various banks, U.S. Treasury Notes, 334 shares of Federated Stock Trust, 679 shares of Midwest Energy Company, and the Shearson T-Fund.

In Part V, Liabilities, I failed to note that I have no reportable liabilities.

In addition, my statement should be amended in Part II, to change the valuation of the joint account at Peoples Bank & Trust Co. to Category C, rather than Category D as indicated.

Sincerely,

David Nagle

David R. Nagle

DRN:ee
enclosures

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 AM 8 09

INSIDE MAIL

William H. Natcher
(Full Name)

2333 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State Kentucky District: Second	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [X]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C. (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

2853

Reporting Individual's Name

William H. Natcher

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1 000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1 001)	B $1,001 - $15 000	C $15 001 - $50,000	D $50 001 - $100 000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1 000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X								X
			George Wash Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	ALL PROPERTIES AND ITEMS LISTED ARE IN BOWLING GREEN, KENTUCKY																												
	Auto Sales Lot 28-10-04; 28-10-4; 28-10-06					X								X							X								
	Mobile Home Property 28-10-03				X									X									X						
	American National Bank & Trust Savings Account				X										X						X								
	South Central Bank Savings Account				X										X					X									
	(Continued)																												

For additional assets and unearned income, use next page

2854

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: William H. Natcher

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																									
½ int. Prop. 28-10-2 728 1st St.		X																							
½ Int. Prop. 28-10-4 718 1st St.		X																							
½ Int. Prop. 28-05-01 U.S. 31-W ByPass			X																						
½ Int. Prop. 28-10-06 719 1st St.		X																							
Prop. 28-10-03 310 U.S. 31-W By-Pass		X																							
Prop. 39-01-01A 310 U.S. 31-W By-Pass		X																							
Prop. 28-10-13 310 U.S. 31-W By-Pass		X																							
½ Int. Prop. U.S. 31-W By-Pass (drive-in)			X																						
½ Int. Prop. 28-05-002 U.S. 31-W ByPass			X																						
½ Int. Prop. Farm 90-60 Natcher Lane		X																							

2855

Reporting Individual's Name

William H. Natcher

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2856

Reporting Individual's Name: William H. Natcher

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
WILLIAM H. NATCHER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [X] No [ ] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
William H Natcher	May 13, 1991

GPO 1991 37-598 (m)

2858

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:47
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

RICHARD E. NEAL
(Full Name)
437 CANNON H.O.B.
(Mailing Address)
WASHINGTON, D.C. 20003

Filer Status	[X] Member of the U.S. House of Representatives — State: MASS. District: 2ND	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date.

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CHICAGO MERCANTILE EXCHANGE	HONORARIUM	$750.00	
	CHICAGO BOARD OF TRADE	HONORARIUM	$750.00	
	DISTILLED SPIRITS COUNCIL	HONORARIUM	$2000.00	
	RAYTHEON COMPANY	HONORARIUM	$2000.00	
	SECURITIES INDUSTRY ASSOCIATION	HONORARIUM	$2000.00	
	ENVELOPE MANUFACTURERS ASSOCIATION	HONORARIUM	$2000.00	
	MASSACHUSETTS MUTUAL LIFE INS. CO.	HONORARIUM	$2000.00	
	JOHN HANCOCK COMPANY	HONORARIUM	$2000.00	
	NATIONAL COUNCIL OF SAVINGS INSTITUTIONS	HONORARIUM	$3000.00	

For additional earned income, use next page

2859

Reporting Individual's Name
RICHARD E. NEAL

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S	ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	SHEARSON LEHMAN (STOCK—MONEY MARKET ACCOUNT)		X								X								X								
	CITY OF SPRINGFIELD (MA.) RETIREMENT ACCOUNT			X																							
	SAVINGS ACCOUNT SPRINGFIELD INST. FOR SAVINGS	X											X						X								
	MID-SOUTH RAILROAD (STOCK) (NO PAYMENTS)		X															X									
	U.S. HOUSE SAVINGS ACCT. (NO PAYMENTS IN 1990)		X															X									

For additional assets and unearned income, use next page

2860

Reporting Individual's Name

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	BAYBANK HOME IMPROVEMENT LOAN			X					
	LUDLOW SAVINGS BANK HOME IMPROVEMENT LOAN		X						

Reporting Individual's Name

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
PUBLIC BROADCASTING SERVICE/GENERAL MOTORS	VIDEO TAPE SET-"THE CIVIL WAR"	$200.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
NATIONAL COUNCIL OF SAVINGS INSTITUTIONS		NOV 30-DEC 31 1990	AMTRAK TICKET-LODGING-FOOD, SELF AND SPOUSE	$687
CHICAGO BOARD OF TRADE		DEC. 13	AIR TRAVEL — HARTFORD-CHICAGO-WASHINGTON	$975

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

28862

Reporting Individual's Name

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[signature]	5/10/91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 22 PM 3:36
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) (5)

RICHARD E. NEAL
(Full Name)

437 CANNON H.O.B.
WASHINGTON, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: MASS. District: 2ND.	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment 5-22-91	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CHICAGO MERCANTILE EXCHANGE (12-13-90)	HONORARIUM	$750.00	
	CHICAGO BOARD OF TRADE (12-13-90)	HONORARIUM	$750.00	
	DISTILLED SPIRITS COUNCIL (7-9-90)	HONORARIUM	$2000.00	
	RAYTHEON COMPANY (12-17-90)	HONORARIUM	$2000.00	
	NATIONAL COUNCIL OF SAVINGS INSTITUTIONS (1-31-90)	HONORARIUM	$1000.00	
	SECURITIES INDUSTRY ASSN. (8-2-90)	HONORARIUM	$2000.00	
	ENVELOPE MANUFACTURERS ASSN. (10-15-90)	HONORARIUM	$2000.00	
	MASSACHUSETTS MUTUAL LIFE INS. CO. (4-30-90)	HONORARIUM	$2000.00	
	JOHN HANCOCK CO. (3-5-90)	HONORARIUM	$2000.00	
	NATIONAL COUNCIL OF SAVINGS INSTITUTIONS (12-3-90)	HONORARIUM	$2000.00	

For additional earned income, use next page

2864

Reporting Individual's Name
RICHARD E. NEAL

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income													Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
	SHEARSON - LEHMAN (STOCK-MONEY MKT. ACCOUNT)			X								X								X								
	CITY OF SPRINGFIELD (MA.) RETIREMENT ACCOUNT				X																							
	SAVINGS ACCOUNT SPRINGFIELD INSTT. FOR SAVINGS		X											X						X								
	MID-SOUTH RAIL ROAD (STOCK) (NO '90 PAYMENTS)			X															X									
	U.S. HOUSE SAVINGS ACCT. (NO '90 PAYMENTS)			X															X									

For additional assets and unearned income, use next page

2865

Reporting Individual's Name
RICHARD E. NEAL

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	BAYBANK HOME IMPROVEMENT LOAN			X					
	LUDLOW SAVINGS BANK - HOME IMPROVEMENT LOAN		X						

2866

Reporting Individual's Name
RICHARD E. NEAL

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
PUBLIC BROADCASTING SERVICE/GENERAL MOTORS	1 VIDEO TAPE SET—"THE CIVIL WAR"	$200.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
NATIONAL COUNCIL OF SAVINGS INSTITUTIONS	NOV. 30-DEC. 3	1 WAY AMTRAK TICKET—N.Y.—SPRINGFIELD (MA.) 12-3 PLUS FOOD + LODGING SELF + SPOUSE 11-30 TO 12-3	
CHICAGO BOARD OF TRADE	DEC. 13	AIR TRAVEL HARTFORD (BRADLEY AIRPORT) TO CHICAGO (O'HARE) AND BACK IN SAME DAY	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
RICHARD E. NEAL

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☒

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C. app. 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Richard E. Neal	5/22/91

GPO 1991 37-598 (m)

2868

RICHARD E. NEAL
SECOND DISTRICT MASSACHUSETTS

COMMITTEE ON SMALL BUSINESS
SUBCOMMITTEE ON REGULATION, BUSINESS OPPORTUNITIES AND ENERGY

COMMITTEE ON BANKING FINANCE AND URBAN AFFAIRS
SUBCOMMITTEE ON FINANCIAL INSTITUTIONS SUPERVISION REGULATION AND INSURANCE
SUBCOMMITTEE ON INTERNATIONAL DEVELOPMENT FINANCE, TRADE AND MONETARY POLICY
SUBCOMMITTEE ON HOUSING AND COMMUNITY DEVELOPMENT

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

June 18, 1991

(2)

The Honorable Donnald K. Anderson
Clerk of the House of Representatives
H. 105 - U.S. Capitol
Washington, D.C. 20515

Dear Clerk Anderson:

Since I filed my Financial Disclosure Statement for Calendar Year 1990, I have discovered that I listed the wrong date for the receipt of an honoraria payment. On page A-1, Part I (Earned Income, Including Honoraria), line 5 - "National Council of Savings Institutions." The date is listed as 1-31-90, the correct date is 6-8-90 when I spoke to the graduates of the National School of Banking which is operated by the National Council of Savings Institutions. I regret the error.

If you need additional information on this matter, please contact my office at once.

Sincerely,

Richard E. Neal

RICHARD E. NEAL
Member of Congress

REN/mab

RECEIVED
1991 JUN 19 AM 9:06
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

RECEIVED
1991 JUN 19 AM 10:13
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

437 CANNON HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-5601

1550 MAIN STREET
FEDERAL BUILDING
SPRINGFIELD, MA 01103
(413) 785-0325

881 MAIN STREET
PHILBIN BUILDING
FITCHBURG, MA 01420
(508) 342-7822

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RICHARD E. NEAL
(Full Name)

437 CANNON H.O.B.
(Mailing Address)

WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: MASS. District: 2ND.	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

(Office Use Only)

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U.S. HOUSE OF REPRESENTATIVES

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CHICAGO MERCANTILE EXCHANGE (12-13-90)	HONORARIUM	$750.00	
	CHICAGO BOARD OF TRADE (12-13-90)	HONORARIUM	$750.00	
	DISTILLED SPIRITS COUNCIL. (7-9-90)	HONORARIUM	$2000.00	
	RAYTHEON COMPANY (12-17-90)	HONORARIUM	$2000.00	
	CORRECT DATE: 6-8-90 (1-31-90) NATIONAL COUNCIL OF SAVINGS INSTITUTIONS	HONORARIUM	$1000.00	
	SECURITIES INDUSTRY ASSN. (8-2-90)	HONORARIUM	$2000.00	
	ENVELOPE MANUFACTURERS ASSN. (10-15-90)	HONORARIUM	$2000.00	
	MASSACHUSETTS MUTUAL LIFE INS. CO. (4-30-90)	HONORARIUM	$2000.00	
	JOHN HANCOCK CO. (3-5-90)	HONORARIUM	$2000.00	
	NATIONAL COUNCIL OF SAVINGS INSTITUTIONS (12-3-90)	HONORARIUM	$2000.00	

For additional earned income, use next page

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 5:05

Stephen Lybrook Neal
(Full Name)

1001 Wellington Road
(Mailing Address)

Winston-Salem, North Carolina 27106

Filer Status	[X] Member of the U.S House of Representatives	State: NC District 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

HAND DELIVERED

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(Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Institute of Certified Public Accountants Wash., D.C. (May 23, 1990)	Speech	$2,000	X
	Chicago Board of Trade, Boca Raton, Florida (April 30, 1990)	Speech	$1,000	X
	RJR Nabisco, Wash., D.C. (July 9, 1990)	Speech	$2,000	X
	Kostmayer Communications	Spouse Salary		
	Arnold Zenker Associates	Spouse Salary		
	Note: All honoraria were sent directly to the Winston-Salem Foundation. They were not paid to me.			

For additional earned income, use next page

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Reporting Individual's Name

Stephen L. Neal

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Smith Barney Mutual Fund				X						X										X						
	Media General		X								X								X								
	MMM		X								X								X								
	North Carolina Bonbs					XX							XX										X				
	Quaker Oats			X							X								X								
	Wachovia Money Market Account		X										X							X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Stephen L. Neal

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Vanguard Index Trust				X						X									X						
	Harold Drilling		X								X								X							
	Alliance MMF				X								X								X					
	4187 Patterson Ave., Winston-Salem, NC					X						X											X*(see note below)			
	(Note: The Patterson Avenue building was rented to the Neal for Congress campaign at cost. The net amount of the rent paid was $18,092, roughly $4.50 per sq. ft.)																									
	IRA		X																							
	(Note: To avoid the possibility of even the appearance of any conflict of interest I've invested the money I earned before being elected to Congress almost entirely in either broad based mutual funds or North Carolina Bonds. The one exception was Quaker Oats which I thought would be a good investment because they are the major supplier of oats and it was discovered oats help lower cholesterol. (The MMM was a gift from my mother). I have spent almost no time on investing. My brother, an investment advisor has helped my wife invest the proceeds of selling her RJR.)																									
S	Vanguard Index Trust		X								X								X							
S	IRA		X																							
S	Bristol Myers		X								X								X							
S	Coca Cola		X								X								X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Stephen L. Neal

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Corning		X								X								X							
S	Walt Disney		X								X								X							
S	Dunn & Bradstreet		X								X								X							
S	Hechinger		X								X								X							
S	Merck		X								X								X							
S	N.Y. Times		X								X								X							
S	Procter & Gamble		X								X								X							
S	Rubber Maid		X								X								X							
S	Waste Management		X								X								X							
S	Alliance Money Market Fund			X									X							X						

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Reporting Individual's Name
Stephen L. Neal

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	First Federal Savings & Loan	Mortgage on 4187 Patterson Ave., Winston-Salem, NC				X			
	HouseholdServices Corp.	Mortgage on 7913 Lewinsville Rd., McLean, VA			X				

Reporting Individual's Name

Stephen L. Neal

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE XX

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	
Miami Congressional Workshop (Panelist)	Jan 11-16 1990	Air Travel from Atlanta, GA (on official business in Atlanta) to Miami, FL & return to Wash., DC, food, 4 days lodging, self &	
		spouse. (extra days at own expense)	
Futures Industry (Panelist)	Mar 8-11 1990	Roundtrip air travel Wash., DC to Ft. Lauderdale, FL, food, 4 days lodging, self & spouse.	
Securities Industry (Panelist)	Nov 29- Dec 2, 1990	Roundtrip air travel Wash., DC to Ft. Lauderdale, FL, food, 4 days lodging, self & spouse.	
Z. Smith Reynolds Foundation	Nov 8-10 1990	Air Travel from Winston-Salem to Durham, NC and return to Wash., DC food, lodging.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

Reporting Individual's Name
Stephen L. Neal

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Z. Smith Reynolds Foundation

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Steve Neal	May 15, 1991

GPO 1991 37-[illegible] (m)

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...ED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 1:10

HAND DELIVER

Dick Nichols
(Full Name)

1605 Longworth
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State Kansas District 5	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Home State Bank & Trust Co., McPherson, KS	Salary	34,547.	
	Home State Bank & Trust Co., McPherson, KS	Directors Fees	1,230.	
	Teachers Insurance and Annuity Assoc. of America	Spouse Annuity	N/A	
	College Retirement Equities Fund	Spouse Annuity	N/A	
	Home State Bank & Trust Co., McPherson, KS	IRA Distribution	* 12,301.	
	KOCH Industries, Inc., Wichita, KS	Oil Production	7,389.	

For additional earned income, use next page

*Not subject to outside earned income limit

Reporting Individual's Name

Dick Nichols

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source		**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
JT		Home State Bank & Trust Accounts			X									X								X						
S		U.S. Savings Bonds		X										X								X						X
		Home State Bank Shares, Inc. (Common stock) (A bank holding company which owns 100% of Home State Bank & Trust Co., McPherson, KS)								X		X							X									
JT		Working Interest-Oil Well, Marion Co., KS			X													Oil Production					X					

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

Dick Nichols

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Note Receivable from Dick Nichols for Congress						X						X										X				X
	Associated Financial Services, Inc.- Common Stock (an Insurance Agency)		X								X							X									
	Home State Bank & Trust Co. - Profit Sharing Plan					X											* See Below			X							

* Profit Sharing - Interest, Dividends, and Capital Gains

2880

Reporting Individual's Name: Dick Nichols

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	U.S. Savings Bonds		X		11-23-90	X						
	Notes Receivable from Dick Nichols for Congress (Campaign Committee)	X			* See Below					X		

* 13 separate notes dated from March 31, 1990 through December 31, 1990

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Home State Bank & Trust Co., McPherson, KS	Personal loan		X					
	Merchants National Bank, Topeka, KS	Personal loan				X			

"NOT APPLICABLE"

Reporting Individual's Name: Dick Nichols

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

"NOT APPLICABLE"

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name

Dick Nichols

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	Home State Bank & Trust Co., McPherson, KS
Director President	Kansas, Inc. (Terminated 1990) Home State Bankshares, Inc., McPherson, KS
Commanding General Director	Kansas Calvary (Terminated 1990) Associated Financial Services, Inc., McPherson, KS

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
7-31-89	Home State Bank & Trust Co., and Richard D. Nichols	Deferred Compensation Agreement for past services *
		* None received as of April 30, 1991

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Richard D. Nichols	5-9-91

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:49
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Eleanor Holmes Norton
(Full Name)

10 Ninth Street, S.E.
(Mailing Address)

Washington, D.C. 20003

Filer Status	[X] Member of the U.S. House of Representatives — State: D.C. District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Georgetown University	Wages	$43,049	
	Henry Kaiser Foundation	Speech	1,000	
	Howard University	Speech	2,000	
	Johns Hopkins University	Speech	500	
	Manpower Demonstration Research Corporation	Director's Fee	1,500	
	Metropolitan Life	Director's Fee	41,386	
	National Public Radio	Commentator Fee	600	
	National Institute for Dispute Resolution	Speech	1,500	
	Pitney Bowes	Director's Fee	33,167	
	Public Review Board (UAW)	Director's Fee	8,220	

For additional earned income, use next page Continued on Next Page

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Reporting Individual's Name
Eleanor Holmes Norton

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Rockefeller Foundation	Honoraria, Trustee's Fee	$ 7,500	
Rutgers University	Speech	1,000	
Stanley Works	Director's Fee	23,000	
Washington University	Speech	3,500	
Program Corporation of America *	Speeches	137,750	
* Program Corporation of America acts as			
Congresswoman Norton's agent for speaking			
engagements at various educational institutions,			
civil rights organizations and other organizations.			

Reporting Individual's Name

Eleanor Holmes Norton

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Category of Value (X)									BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Oakter Associates, L.P.				X								X							X							
	Rittenhouse Square Associates			X														X									
	Intergen Investors			X														X									
	Pitney Bowes Common Stock		X								X			X					X	X							X
	Stanley Works Common Stock		X								X								X								X
	TIAA CREF Retirement Annuity					X					Income yet to be derived																

For additional assets and unearned income, use next page Continued on Next Page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Eleanor Holmes Norton

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	TIAA CREF - Supplemental Retirement Annuity			X							Income yet to be derived																
Resources Trust IRA	High Equity Partners Series 85		X																								
	Resources Accrued Mortgage Inv. Series 86		X																								
	American Cable TV Investors IV		X														Income yet to be derived										
	High Equity Partners Series 86		X																								
	Technology Funding Venture Partners IV		X																								
	RTC Cash Account	X																									
Resources Trust Keogh	RTC Cash Account		X																								
	Angeles Income Properties LTD		X																								
	American Cable TV Investors III			X																							
	High Equity Partners Series 85		X														Income yet to be derived										
	Resources Accrued Mortgage Inv. Series 86		X																								
	Synthetic Industries LP			X																							
	Equus Investments II LP		X																								
	Westmed I LP		X																								

Continued on Next Page

Reporting Individual's Name: Eleanor Holmes Norton

PARTS II AND III—ASSETS AND "UNEARNED" INC

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Rotor Tool LP				X																						
Star Partners II LTD			X																							
Technology Funding Venture Partners II				X							Income yet to be derived															
MC Bottlers LP				X																						
AIM Constellation Fund			X																							
Integrated Resources Amer Insured Mort Services 85			X																							
RPS Realty Trust			X																							
The Adams National Bank			X										X					X								
Noninterest bearing loan to Citizens for Eleanor Holmes Norton				X																						
American Cable TV Investors IV	DC		X															X								

Resources Trust Keogh (continued)

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Reporting Individual's Name
Eleanor Holmes Norton

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Stanley Works Common Stock		X		9-14-90	X						
	Pitney Bowes Common Stock		X		9-14-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
		N/A							

Reporting Individual's Name
Eleanor Holmes Norton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
	N/A	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
			N/A	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
Eleanor Holmes Norton

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
See exhibit A	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1990	Georgetown University	Extended leave of absence from
		position as Professor of Law
		from January 1991 - 1993

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [X] No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Eleanor H Norton	May 15, 1991

GPO 1991 37 598 (m)

Eleanor Holmes Norton
Financial Disclosure Statement for 1990
Exhibit A, Part VII, Positions

Position	Name of Organization
Professor of Law*	Georgetown University
Chair**	American Civil Liberties Union, National Advisory Council
Member of the Board	A. Phillip Randolph Institute
Of Counsel**	Boasberg & Norton
Member of the Board	Catalyst
Vice-Chair**	Center for National Policy
Member	Citizens Commission on Civil Rights
Member of the Board	Citizens for Presidential Primary Reform
Trustee	Community Foundation of Greater Washington
Member	Council on Foreign Relations
Member**	D.C. Commission on Public Education
Member of the Board	Economic Policy Institute
Member of the Board**	Manpower Research Development Corporation
Trustee	Martin Luther King, Jr. Center for Social Change
Member of the Board**	Metropolitan Life
Member, Executive Committee	National Lawyer's Council
Commentator**	National Public Radio
Member of the Board and Secretary**	National Urban Coalition
Member of the Board**	Pitney Bowes
Member	Public Agenda Foundation, Policy Review Board
Trustee**	Rockefeller Foundation
Member of the Board	Roy Wilkins Foundation
Member of the Board	Southern Christian Leadership Conference
Member of the Board**	Stanley Works
Member**	United Auto Workers Public Review Board
Member, Board of Visitors	University of Maryland Law School
Member of the Board of Trustees**	Urban Institute
Chair	Women's Law and Policy Fellowship
Chair	Workplace Health Fund

* on extended leave of absence from January 1991 - 1993
** denotes resignation effective January 1, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees
P. 1 of 13

HAND DELIVERED

Henry J. Nowak
(Full Name)

2240 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: New York District: 33rd	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 13

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Rose Nowak (spouse), Hunt Real Estate Agent	Commissions	NA	
	Regular Common Carrier Conference (2-12-90)	Honorarium	$2000	
	Sutter Bay Associates (2-15-90)	Honorarium	$2000	
	Farmer's Rice Cooperative (2-16-90)	Honorarium	$1000	
	Association of American Railroads (3-3-90)	Honorarium	$1000	
	A.J. Corbett & Sons Inc. (3-14-90)	Honorarium	$2000	
	Greater Pittsburgh Chamber of Commerce (4-6-90)	Honorarium	$1000	
	Miami River Recycling Inc. (4-9-90)	Honorarium	$500	
	Miami Shipyards Corp. (4-9-90)	Honorarium	$500	
	N.Y. State & Local Employees' Retirement System	Pension	$8722	

For additional earned income, use next page

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Reporting Individual's Name

Henry J. Nowak - P. 2

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Eagle Tire Co. Inc. (4-9-90)	Honorarium	$200	
Hyde Shipping Corp. (4-9-90)	Honorarium	$200	
Pioneer Shipping Inc. (4-9-90)	Honorarium	$200	
Bayview Marine Terminal Inc. (4-9-90)	Honorarium	$200	
Continental Shipping Corp. (4-9-90)	Honorarium	$200	
Assn. of Metropolitan Sewerage Agencies (5-5-90)	Honorarium	$1000	
IUOE Local 17 Political Action Committee (6-14-90)	Honorarium	$2000	
Jacksonville Port Authority (6-24-90)	Honorarium	$1000	
American University (9-25-90)	Honorarium	$500	
Regular Common Carrier Conference (11-10-90)	Honorarium	$2000	
Miami River Maritime Group (12-13-90)	Honorarium	$1800	
Joe Tietelbaum (12-13-90)	Honorarium	$200	
John R. LaCapra (12-13-90)	Honorarium	$2000	
Corporate Planners Inc. (12-14-90)	Honorarium	$2000	

Reporting Individual's Name
Henry J. Nowak P. 3

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X								X								X
	Examples: George Wash. Credit Union Accounts				X									X								X						
	Examples: 182 Main Street, Dover, Delaware					X							X								X							
	Atlantic Federal Savings & Loan			X										X						X								
JT	M&T Bank			X										X					X									
	Riggs National Bank			X										X						X								
	Merrill Lynch CMA Money Fund					X								X									X					
	NY State Muni. - MIT Series 89			X										X							X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) PAGE 2

Reporting Individual's Name: Henry J. Nowak P.4

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
NY State Energy Res. PV Bonds			x									x								x						
General Electric Common Stock		x								x			x				x		x						x
Merrill Lynch Fund for Tomorrow			x							x			x					x		x					x
N.Y. Muni. Bond Fund Class B			x									x							x						x
Merrill Lynch Intl. Hold Cl B		x								x							x								x
Merrill Lynch Cap. Fund Cl B		x								x							x								x
Merrill Lynch Pac. Fund Cl B		x								x							x								x
M/L Sci-Tech Hold Cl B		x								x							x								x
C&S Sovran Corp. Common Stock		x								x							x								
Cummings Eng. Co. Inc. c/s		x								x								x							
Fleet Norstar Fin. Corp. c/s		x								x							x								
Lakeland Ind. Inc. c/s		x								x							x								
Mark IV Ind. Inc. c/s		x								x							x								
McCaw Cellu. Comms.-A c/s		x								x							x								

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) Page 3

Reporting Individual's Name: Henry J. Nowak P. 5

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Nova Corp. of Alberta c/s		X								X								X								
	Sensormatic Electrns. c/s		X								X							X									
	Smith Corona Corp. c/s		X								X							X									
	Campbell Soup c/s		X											X							X						X
	Monsanto c/s		X											X						X							X
	Archer Daniels Midland c/s		X											X						X							X
	Medco Contmt. c/s		X											X						X							X
	First Empire c/s		X											X							X						X
	Clorox c/s		X											X				X									X
	Eaton Corp. c/s		X											X				X									X
	Newel Corp. c/s		X											X				X									X
	Continental Bank c/s		X								X							X									

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: Henry J. Nowak P. 6

Continuation Sheet (if needed) Page 4

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Safecard c/s		x											x					x								x
	Syntex c/s		x											x				x									x
	Allergan Inc. c/s		x								x							x									
	Nationwide Health Prop. c/s		x								x								x								
	Merrill Lynch Lee Acq. Fund		x								x								x								
	M.L. Corp. Bond Hi Inc. Fund		x										x							x							
	Tigr Series 14		x										x						x								
	Gillette c/s		x											x						x							x
	Quaker Oats c/s		x											x				x									x

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) PAGE 5

Reporting Individual's Name: Henry J. Nowak P.7

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
M.L. Cap. Bond Fund			X										X						X								
M.L. Ret. Res. Fund			X										X						X								
United Technology c/s			X								X							X									X
Atlantic Coast Storage Assoc. Partnership				X										X					X								
Sharon Wells Program No. 5			X											X					X								
5-Unit Bldg., Laud. Lakes, Fla.						X						X									X						
4-Unit Bldg., Ft. Laud., Fla. Mortgage Held						X						X		X									X				X
Land Trust, St. Lucie Cty., Fla.			X											X					X								X
2312 Cypress Bend, Pompano, Fla.				X								X						X									
Linden Ave., duplex, Buffalo, NY					X							X						X									
2-Unit, Const. Av. NE, Wash. DC.						X						X								X							
Pt. Abino Rd., (Frame House)					X							X						X									

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Reporting Individual's Name
Henry J. Nowak P. 8

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	General Electric, common stock (c/s)		x		7-25-90	x						
	Merrill Lynch (M.L.) Fund for Tomorrow		x		7-31-90		x					
	New York Muni. Bond Fund Cl B	x			7-31-90		x					
	New York Muni. Bond Fund Cl B		x		10-25-90		x					
	SEE CONTINUATION SHEET ATTACHED											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	SEE ATTACHMENT								

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Henry J. Nowak
Part IV TRANSACTIONS---CONTINUATION SHEET 1990

M.L. Intl. Hold. Cl B	purchase	10-25	B
M.L. Cap. Fund Cl B	purchase	10-25	B
M.L. Pac. Fund Cl B	purchase	10-25	B
M.L. Sci. Tech. Hold Cl B	purchase	10-25	B
Campbell Soup c/s	sale	1-2	B
Monsanto c/s	sale	1-15	B
Archer Daniels Midland c/s	sale	1-23	B
Gillette c/s	sale	7-25	B
Medco Contmt. c/s	sale	7-25	B
First Empire c/s	sale	8-2	B
Clorox c/s	purchase	6-4	B
	sale	9-28	B
Eaton Corp. c/s	purchase	6-4	B
	sale	9-28	B
Newel Corp. c/s	purchase	6-4	B
	sale	9-28	B
Quaker Oats c/s	purchase	6-13	B
	sale	9-28	B
Safecard c/s	sale	9-28	B
Syntex c/s	purchase	6-4	B
	sale	9-28	B
Gillette c/s	sale	9-28	B
United Technology c/s	sale	1-26	B
4 Unit Bldg. Ft. Lauderdale, Fla.	sale	2-7	E
Land Trust St. Lucie County, Fla.	sale	2-1	B

Henry J. Nowak
Part V - LIABILITIES - 1990

CREDITOR	MORTGAGES	VALUE
Atlantic Fed. S&L Florida	5-Unit Rental 3030 NW Terrace Lauderdale Lakes, Fla.	C
Coral Gables S&L Florida	2312 Cypress Bend Dr. Pompano Beach, Fla.	B
Chase Home Mtg. Corp. New Jersey	1217 Constitution NE Washington, D.C.	D
Jack Needleman Washington, D.C.	Second Trust 1217 Constitution NE	B
Chase Lincoln First New York	Linden Ave. Duplex Buffalo, New York	D
Southern Fed. Savings Florida	4-Unit Rental 3861-3881 3rd Ave. Ft. Lauderdale, Fla.*	C

(*Second trust on this property satisfied in 1990. Value below reporting requirements.)

Reporting Individual's Name
Henry J. Nowak P. 11

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [XXXXX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
			SEE ATTACHMENT	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

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Henry J. Nowak
Attachment: Part VII - "Reimbursements" *1990*

Regular Common Carrier Conference, Feb. 7-12, roundtrip airfare between Washington, D.C. and Ft. Lauderdale, Fla. and Baltimore, Md., plus one day food/lodging. Self. Extra days at own expense. Speech.

Association of American Railroads, March 2-5,roundtrip airfare between Baltimore/Buffalo and Phoenix, Arizona, plus 3 days food/lodging. Self and spouse. Conference panelist.

Greater Pittsburgh Chamber of Commerce, April 4-18, roundtrip airfare between Washington/Buffalo and Ft. Lauderdale, plus 3 days food/lodging. Self and spouse. Speech. Extra days at own expense.

Association of Metropolitan Sewerage Agencies, May 5-7, roundtrip airfare between Buffalo and Houston and Washington, plus 2 days food/lodging. Self. Speech.

Jacksonville Port Authority, June 24-26, roundtrip airfare between Buffalo and Jacksonville and Washington, plus 2 days food/lodging. Self. Speech.

Regular Common Carrier Conference, Nov. 7-18, roundtrip airfare between Buffalo and Ft. Lauderdale. Self and spouse. Speech. All food/lodging at own expense.

Corporate Planners Inc., Dec. 14-18, roundtrip airfare between Buffalo and San Juan, plus 4 days food/lodging. Self and spouse. Speech.

Reporting Individual's Name
Henry J. Nowak - P.13

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Daemen College, Snyder, New York
Chairman	National Water Alliance, Washington, D.C.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Henry J. Nowak	5/14/91

GPO: 1991 37-508 (m)

HENRY J. NOWAK
33b District, New York

Committees:
PUBLIC WORKS AND TRANSPORTATION
Chairman:
Subcommittee on Water Resources

SCIENCE, SPACE, AND TECHNOLOGY

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

Washington Office:
2240 Rayburn House Office Building
Washington, DC 20515
(202) 225-3306

District Office:
U.S. Courthouse
Room 212
Buffalo, NY 14202
(716) 853-9131

June 17, 1991

Rep. Louis Stokes, Chairman
Committee on Standards of
Official Conduct
Suite HT-2, The Capitol
Washington, D.C. 20515

1

MC

Dear Mr. Chairman:

In reply to the request for further information regarding the 1990 Financial Disclosure Statement, please find:

1. The acquisition and sale of New York Muni Bond Fund Class B were reported on Page 8 of my 1990 Report.

2. Acquisition dates for the following common stocks: Fleet Norstar Fin. Corp. (11/2/89), Lakeland Ind. Inc. (8/7/87), Mark IV Ind. (1/2/89), McCaw Cellu. Comms. (6/7/89), Nova Corp. of Alberta (4/7/89), Sensormatic Electrns (12/29/89), Smith Corona (7/28/89), Campbell Soup (5/17/89), Monsanto (8/7/87) Archer Daniels Midland (5/3/88) Medco Contmt. (7/18/89), First Empire (12/15/87), Safecard (12/29/89), Nationwide Health Prop. (6/9/86 and 5/26/88), Merrill Lynch Lee Acq. Fund (8/21/87), M.L. Corp. Bond Hi Inc. Fund (10/31/85 and 3/16/87), TigrSeries 14 (10/31/85), Gillette (2/8/89). These securities are contained in retirement accounts.

3. The 1990 acquisition dates of these listed stocks are as follows: C&S Sovran Corp. and Cummings Engine, June 4; Continental Bank and Allergan, June 6.

4. Am. City Business Journal and General Motors common stock were reported as sales on Continuation Sheet - Page Four of my 1989 Report.

5. Sharon Wells Prog. No. 1 Ltd. Partnership was not listed as a 1990 asset because it had no reportable value.

I trust this information is satisfactory.

Sincerely,

HENRY J. NOWAK
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 7:27

HAND DELIVERED

James Allen Nussle
(Full Name)

507 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Iowa District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Delaware County, Iowa	Salary - self	$20,050.52	
	Delaware County Hospital	Spouses's Salary	NA	
	St. Luke's Hospital	Spouses's Salary	NA	
	Kirkwood Community College	Spouses's Salary	NA	

For additional earned income, use next page

2907

Reporting Individual's Name

James Allen Nussle

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X									X							X
			George Wash. Credit Union Accounts			X								X								X						
			162 Main Street, Dover, Delaware				X						X									X						
	Farmers and Merchants Bank - Iowa			X										X						X								

For additional assets and unearned income, use next page

2908

Reporting Individual's Name: James Allen Nussle

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Farmers and Merchants Bank, Manchester, Iowa	Loan - personal	X						
	Farmers and Merchants Bank, Manchester, Iowa	Loan - personal	X						

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Reporting Individual's Name

James Allen Nussle

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

James Allen Nussle

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jim Nussle	5/13/91

GPO: 1991 37-588 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 6:38
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MK (Office Use Only) 7

Mary Rose Oakar
(Full Name)

1892 West 30th Street
(Mailing Address)

Cleveland, Ohio 44113

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio District: 20th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	P.M. Haeger & Associates, Inc., Wash. DC (2/6/90)	Speech	$750.00	
	Lazard Freres & Co., New York, (2/15/90)	Speech	$2,000.00	
	National Assn. of Postmaster of the US, Wash, DC (2/21/90)	Speech	$1,000.00	
	Graphic Communications Inter. Union, Wash, DC (2/26/90)	Speech	$1,000.00	
	National ASsn. of Federal Credit Unions, Wash, DC (3/12/90)	Speech	$750.00	
	Securities Industry Assn., Inc, Wash, DC (3/21/90)	Speech	$2,000.00	
	National Assn. of Homecare, Wash, DC (3/26/90)	Speech	$1,000.00	

For additional earned income, use next page

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Reporting Individual's Name

Mary Rose Oakar

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Saint Mary's College, Notre Dame, Indiana (5/19/90)	Commencement Speech	$1,000.00	
National Assn. of Letter Carriers, New Orleans, LA (9/21/90)	Speech	$2,000.00	

Reporting Individual's Name
Mary Rose Oakar

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman Credit Union					X						(Income not yet derived, IRA account)																	
	1888 W. 30th (part of duplex					X								X								X							
	of Cleveland, Ohio family home)																												
	3000 Carroll Ave., Cleveland					X								X							X								

For additional assets and unearned income, use next page

Reporting Individual's Name

Mary Rose Oakar

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Wright Patman Credit Union, Wash, DC	personal & homeowner loans		X					
	Ameritrust Corp., Cleveland, Ohio	mortgage on 1888 W. 30th & 3000 Carroll Avenue.		X					

Reporting Individual's Name
Mary Rose Oakar

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Komen Breast Cancer Foundation of Dallas, Texas	Crystal engraved bowl (Award)	approx. $125.

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Greater Cleveland Growth Assn.	2/12/90	Roundtrip air travel, DC-New York-DC	
Rock-n-Roll Hall of Fame	3/20/90	Roundtrip air travel, DC-New York-DC	
Univ. of Cincinnati	3/3/90	Roundtrip air travel, Cleveland-Cincinnati-Cleveland	
American Arab Anti-Discrimination Committee	5/11/90	Roundtrip air travel, DC-Los Angeles-DC	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

****SEE ATTACHMENT

MARY ROSE OAKAR
20TH DISTRICT, OHIO

WASHINGTON OFFICE
2231 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5871

DISTRICT OFFICE
523 FEDERAL COURT BUILDING
215 SUPERIOR AVENUE
CLEVELAND, OH 44114-1281
(216) 522-4927

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEES
BANKING, FINANCE
AND URBAN AFFAIRS
CHAIR, SUBCOMMITTEE ON INTERNATIONAL DEVELOPMENT, FINANCE, TRADE AND MONETARY POLICY

POST OFFICE AND CIVIL SERVICE

SELECT COMMITTEE ON AGING
CHAIR, TASK FORCE ON SOCIAL SECURITY AND WOMEN

COMMITTEE ON HOUSE
ADMINISTRATION
CHAIR, SUBCOMMITTEE ON PERSONNEL AND POLICE

WHIP AT LARGE

VII - Reimbursements

Nat. Assn. of Letter Carriers	8/23/90	Roundtrip air travel, DC-New Orleans-DC 1 night hotel
Komen Breast Cancer Foundation	10/9/90	Roundtrip air travel, DC-Dallas-DC 1 night hotel

Reporting Individual's Name: Mary Rose Oakar

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Ex. Board	Rock & Roll Hall of Fame
Board	Society for Crippled Children

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [ ] NA [X]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Mary Rose Oakar	May 15, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2:5
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

JAMES LOUIS OBERSTAR
(Full Name)

2209 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: Minnesota District: 8	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	J.O. Associates	Spouse Salary	NA	
	Airport Operators Council Int'l Washington, DC (2-13-90)	Speech	2,000	
	Iowa Construction Industry, Des Moines, IA (1-18-90)	Speech	2,000	
	The Boeing Company, Seattle, WA (3-9-90)	Speech	2,000	
	Int'l Fiscal Assn., Philadelphia, PA (3-1-90)	Speech	2,000	
	Georgia Institute of Technology, Atlanta, GA (3-20-90)	Speech	2,000	
	AVMARK, Arlington, VA (3-27-90)	Panel Presentation	2,000	
	Airport Operators Council Int'l, Washington, DC Amer. Assn. of Airport Executives, Alexandria, VA (3-19-90)	Speech to Joint Conference	1,000	
	North Carolina Airports Assn., Charlotte, NC (4-12-90)	Speech	1,000	
	Gannett Outdoor Company of Chicago, IL (4-18-90)	Speech	2,000	

For additional earned income, use next page

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Reporting Individual's Name

James L. Oberstar

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Stone Association, Washington, DC (4-24-90)	Speech	1,000	
Harris Corporation, Alexandria, VA (4-27-90)	Speech	1,000	
Our Lady of Mercy Church, Potomac, MD (3-26-90)	Speech	200	X
American Road and Transportation Builders, Washington, DC (5-23-90)	Speech	1,500	($650 to charity)
American Road and Transportation Builders, Washington, DC (6-4-90)	Speech	2,000	
The Penjerdel Council, Philadelphia, PA (3-26-90)	Speech	2,000	
SW Corridor Transportation Coalition, Waconia, MN (6-11-90)	Speech	2,000	
The Transportation Group, New York, NY (4-20-90)	Speech	2,000	
Airport Operators Council, Washington, DC (9-12-90)	Speech	1,000	X
Greater Dallas Chamber, Dallas, TX (11-19-90)	Speech	2,000	X
UNC, Inc., Annapolis, MD (9-21-90)	Speech	2,000	X
Ocean Spray Cranberries, Middleboro, MA (11-27-90)	Speech	2,000	X
Bell Helicopter/Textron, Fort Worth, TX (11-19-90	Speech	2,000	X

Reporting Individual's Name

James L. Oberstar

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Wright Patman Congressional Federal Credit Union			X									X							X							
JT	Chevy Chase FSB, Inc.				X								X									X					
DC	Wright Patman Congressional Federal Credit Union		X										X						X								
DC	Chevy Chase FSB, Inc.		X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name

James L. Oberstar

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
DC	HEMAR, St. Paul, MN	College Loans		X					

2922

Reporting Individual's Name
James L. Oberstar

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Airport Operators Council Int'l		1/24-28/90	Roundtrip air from Wash., DC, to Tampa, FL; 4 days food and lodging for self and spouse	
Iowa Construction Industry		1/18/90	Roundtrip air from Wash., DC, to Des Moines, IA; lunch	
The Boeing Company		3/8-10/90	Roundtrip air from Wash., DC, to Seattle, WA; 2 days food and lodging	
Georgia Institute of Technology		3/19-20/90	Roundtrip air from Wash., DC to Atlanta, GA; one night lodging and food	
North Carolina Airports Assn.		4/12/90	Air Charter from Wash., DC to Ashville, NC; dinner	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
James L. Oberstar - Continued

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

CONTINUATION OF THIS SECTION ONLY:

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Harris Corporation	4/26-27/90	Roundtrip air from Wash., DC, to Melbourne, FL; one night lodging and food	
The Transportation Group	4/20-21/90	Roundtrip air from Wash., DC, to Los Angeles, CA; one night lodging and food.	
United Steelworkers of America	8/28/90	Roundtrip air from Wash. DC, to Toronto, Canada, and meal	
Greater Dallas Chamber	9/18-19/90	Roundtrip air from Wash. DC, to Dallas, TX; one night lodging and food.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
James L. Oberstar

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [XX] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James L. Oberstar	May 14, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 07
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

David R. Obey
(Full Name)

2462 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Wisconsin District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Arthritis Foundation (Rec'd 3/1/90)	Speech	$1,000.	
	The Associated General Contractors of America (Rec'd 3/28/90)	Speech	$2,000.	
	North American Export Grain Association, Inc. (Rec'd 4/20/90)	Speech	$2,000.	
	National Cooperative Business Association (Rec'd 4/30/90)	Speech	$2,000.	
	Chicago Mercantile Exchange (Rec'd 4/30/90)	Speech	$ 750.	
	Chicago Board of Trade (Rec'd 4/30/90)	Speech	$ 750.	
	Waste Management Inc. (Rec'd 4/30/90)	Speech	$2,000.	
	Coalition for Employment Through Exports, Inc. (Rec'd 6/5/90)	Speech	$1,000.	
	Illinois CPA Society (Rec'd 6/25/90)	Speech	$2,000.	
	National Association of Realtors (Rec'd 6/27/90)	Speech	$2,000.	

For additional earned income, use next page

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Reporting Individual's Name
David R. Obey

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Sindhi Association of North America (SANA) (Rec'd 7/14/90)	Speech	$2,000.	
American Group Practice Association (Rec'd 10/2/90)	Speech	$ 500.	
Blue Cross & Blue Shield (Rec'd 11/8/90)	Speech	$2,000.	
Ocean Spray Cranberries Inc. (Rec'd 12/5/90)	Speech	$2,000.	
United States Telephone Association (Rec'd 12/18/90)	Speech	$2,000.	
American Trucking Associations Inc. (Rec'd 12/20/90)	Speech	$1,000.	

Reporting Individual's Name
David R. Obey

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
	Riggs National Bank of Virginia (Arlington)			X													IRA'S	X								

For additional assets and unearned income, use next page

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Reporting Individual's Name
David R. Obey

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2929

Reporting Individual's Name
David R. Obey

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Aspen Institute	Jan. 10-15, 1990	Roundtrip Air from Wash. D.C. to Montego Bay, Jamaica, 5 days food & lodging, self & spouse (Self & spouse participants in seminar on Soviet Relations)	
The Associated General Contractors of America	Mar. 15-17, 1990	Roundtrip Air from Wash. D.C. to San Francisco, CA, 2 nights lodging (Speech)	
Chicago Mercantile Exchange	April 27, 1990	Air travel from Wash. D.C. to Chicago, IL to Minneapolis, MN (Speech)	
Illinois CPA Society	June 24-25, 1990	Air travel from Duluth, MN to Milwaukee, WI to Wash. D.C., 1 night lodging, meal (Speech)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name

David R. Obey

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [ ] NA [X]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
David R. Obey	May 14, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 PM 1:57
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

James Randolph Olin
(Full Name)

1410 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Filer Status	[ ] Member of the U.S House of Representatives [x]	State: VA District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

10
(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	General Electric Company	Pension	77869	
	General Electric Company	Deferred Compensation	54031	
	Deep Springs College	Teaching fee	5000	

For additional earned income, use next page

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Reporting Individual's Name: James R. Olin

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	General Electric Company Stock						X						X									X								
	Roanoke Gas Company stock				X								X								X									X
	Merrill Lynch CMA						X						X										X							
	NCNB Bank Dallas CD			X											X							X								X
	Merrill Lynch B&T CD			X											X							X								X
	Marine Midland Bank, Del. CD			X											X							X								X

For additional assets and unearned income, use next page

Reporting Individual's Name: James R. Olin

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	U.S. Treasury Bonds					X							X									X					X
	Suffolk Hospital Bonds			X									X							X							X
	Virginia Port Authority Bonds			X									X							X							
	ML Euro Fund			X							X								X								X
	Nuveen Mun.Fund				X						X									X							X
	Roanoke VA Hospital Bonds			X									X					X									X
	Virginia Beach Bonds			X									X					X									X
	Muni Invest Trust Bonds			X									X								X						X
	Flag Ship Fund					X					X											X					X
	Merril Lynch Prime Fund				X						X									X							X
	Met Life Gov't. Ins. Fund				X						X											X					X
	Merrill Lynch IRA			X							X							X									
	U.S. Savings Bonds		X										X					X									
	Elfun Fund						X						X										X				X
S	Elfun Fund (wife)					X							X									X					X

Continued on Attached Sheet

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James R. Olin

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Property, Partial Owner ~~3113 No. 2nd Rd.~~ Arlington, VA 22021				X														X									
Property, Partial Owner ~~3400 Hanover Street~~ Richmond, VA 23221				X														X									

Reporting Individual's Name
James R. Olin

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	Roanoke Gas Company Stock	x			12-19-90	x						
	NCNB Bank CD		x		4-11-90		x					
	Merrill Lynch B&T CD		x		10-3-90		x					
	Marine Midland Bank CD		x		10-22-90		x					
	US Treasury Bonds	x			4-4-90		x					

Continued on next Sheets...

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [XX]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name
James R. Olin

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Suffolk Hospital Bonds		x		1-2-90	x						
	ML Euro Fund	x			3-7-90		x					
	Nuveen Mun. Fund	x			6-28-90			x				
	Roanoke VA Hosp. Bonds	x			10-16-90		xx					
	Virginia Beach Bonds	x			10-17-90		x					

Reporting Individual's Name

James R. Olin

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Municipal Inv. Trust Bonds		xx		3-26-90 6-25-90							
					12-26-90	x						
	Flagship Fund	x			various	x						
	Merrill Lynch Prime Fund	x			various	x						
	Met Life Gov. Ins. Fund		X		6-25-90			x				

Reporting Individual's Name

James R. Olin

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Met Life Gov. Ins. Fund	x			various	x						
	Elfun Fund	x			various		x					
S	Elfun Fund	x			various	x						

Reporting Individual's Name
James R. Olin

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [XX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Pax World Foundation	12-29-89 to 1-12-90	Round trip New York to Israel and Jordan and return. Pax World paid about 40% of cost for wife and me ofcost of transportation, room, board, and resource people.	
Deep Springs College, CA	Apr. 6-16, 1990	Deep Springs paid round trip air travel (Roanoke-Las Vegas) and car rental for wife and me to conduct one week seminar series at the college.	
Chemical Producers Association	Aug. 7, 1990	Round trip air fare (Roanoke to Boston) to give speech on Farm issues.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: James R. Olin

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board of Directors	Garth Newel Music Center
Board of Directors	Roanoke Transportation Museum

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
	I retired from General Electric Company on January 1, 1982,	and will enjoy various
	benefits that acrued to me during employment (and are provided	for all General Electric
	retirees of the same category) such as pension plan, deferred	incentive compensation, medical and
	life insurance.	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James R. Olin	May 9, 1991

GPO 1991 37-598

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 12: 17

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Solomon Porfirio Ortiz
(Full Name)

2445 Rayburn HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: TX District: 27	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Texas-Indo American Physicians,San Antonio, TX	Speech	$500	
	LTV Aerospace and Defense,Dallas, TX	Speech	2000	
	Texas Instruments, Dallas, TX	Speech	2232	

For additional earned income, use next page

2942

Reporting Individual's Name
Solomon Porfirio Ortiz

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Cong. Federal Credit Union,Cert.		X										X						X								
	Cong. Fed. Credit Union-Accounts		X										X						X								
	1250 4th St.,SW #511,Wash. D.C.				X							X										X					
	Equitable,Washington, D.C.		X										X						X								
	Amtex, Inc.,Corpus Christi, TX			X							X										X						
	Dean Witter,San Antonio, TX			X							X		X						X								

For additional assets and unearned income, use next page

2943

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Solomon Porfirio Ortiz

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																										
Unimproved Lots,Robstown, TX		X																								
Crooked Tree Lot,Robstown, TX		X																								
Seaside Villa Condo,1/2 owner			X																							
--Corpus Christi, TX																										

Reporting Individual's Name

Solomon P. Ortiz

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Alliance Mortgage Co.,Jacksonville, FL	Mortgage on 1250 4th St.,SW		X					

Reporting Individual's Name
Solomon P. Ortiz

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [ ]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors	Civil War Video Tapes	$150

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Solomon P. Ortiz

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	Amtex Security, Inc.--Corpus Christi, TX

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Solomon P. Ortiz	May-14-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:57
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

WILLIAM H. ORTON
(Full Name)

1723 L.H.O.B.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Utah District: Third	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

Mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	William H. Orton, Attorney, Salt Lake City, Utah	income from law practice		$18,100.00
	(NOTE: candidate for Congress as of			
	March 1990. No income received in			
	balance of year due to full time			
	campaigning throughout 1990)			
	Only earned income during 1991 is from			
	U.S. Government			

For additional earned income, use next page

2948

Reporting Individual's Name

William H. Orton

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	First Interstate Bank				X								X								X						
	America First Credit Union	X											X					X									
	Silver Screen Partners		X								X		X						X								
	Dean Witter	X									X							X									
	Shearson Lehman	X									X							X									
	Orton Properties (partnership)					X						X	X								X						

For additional assets and unearned income, use next page

2949

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: William H. Orton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Tax Training Institute							X						X							X							
House: 3086 E. Meadow Drive Provo, Utah							X																				
Duplex: 489/491 W. 1800 N. Provo, Utah					X																						
Cash Value Insurance, The Principal Group				X																							
Accounts receivable: law pract.				X																							
Personal Loan: Lisa Lowe			X																								
Personal Loan: Tony Johnson			X																								

Reporting Individual's Name
William H. Orton

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	GMAC Mortgage	Mortgage on House 3086 E. Meadow Dr., Provo, UT				X			
	Grossland Mortgage	Mortgage on Duplex 489/491 W. 1800 N., Provo, UT			X				

2951

Reporting Individual's Name
William H. Orton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☒

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☒

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
William H. Orton

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director/President Chair Advisory Board	Tax Training Institute, Inc. (resigned 12/31/90) Real Estate Tax Institute Foundation (resigned 12/31/90)
Of Counsel, Attorney General Partner	Merritt & Tenney (resigned 12/31/90) Orton Properties
Sole proprietor	William H. Orton, Attorney (resigned 12/31/90)

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C. app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: William H. Orton

DATE (Month, Day, Year): 5/15/91

GPO 1991 37-598 (m)

BILL ORTON
3d District Utah

COMMITTEES
BANKING, FINANCE AND URBAN AFFAIRS
FOREIGN AFFAIRS
SMALL BUSINESS

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
1723 Longworth House Office Building
Washington DC 20515
(202) 225-7751

DISTRICT OFFICE
51 South University Avenue
Room 317
Provo UT 84606
(801) 379-2500

HAND DELIVERED

June 28, 1991

1

MC

The Honorable Donnald K. Anderson
Clerk of the House
H-105, the Capitol
Washington, D.C. 20515

Dear Donn:

Please amend my 1991 financial disclosure form as follows:

Form A parts II and III:

Orton Properties: disclosure of underlying assets

Farm -- Avon, Utah (no address): Category E
House and Farm -- North Ogden, Utah (approx. 600 E. 2100 N.): Category D
Farm Land and Barn -- North Ogden, Utah (approx. 550 E. 2100 N.): Category C
Duplex -- 489/491 W. 1800 N., Provo, Utah: Category D

Add:

Personal Loan -- Orton for Congress: Category D

Part VIII Positions:

Add:

Trustee, President -- Elk Meadows Home Owners Association
Trustee -- Great Western Trail Foundation, (a 501(c)(3) organization)
Both are uncompensated positions

Sincerely,

William H. Orton
Member of Congress

BILL ORTON
3d District Utah

COMMITTEES
BANKING, FINANCE AND URBAN AFFAIRS
FOREIGN AFFAIRS
SMALL BUSINESS

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
1723 Longworth House Office Building
Washington DC 20515
(202) 225-7751

DISTRICT OFFICE
51 South University Avenue
Room 317
Provo UT 84606
(801) 379-2500

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COMMITTEE ON STANDARDS

(2)

MC

HAND DELIVERED

June 28, 1991

The Honorable Louis Stokes
Chairman, Committee on Standards of Official Conduct
The Honorable James V. Hansen
Suite HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Mr. Chairman and Mr. Hansen:

Pursuant to your examination of my financial disclosure statement filed May 15, 1991, you requested additional information on the following:

Unearned Income: Tax Training Institute, Inc.
Your letter indicated that the type of income indicated [interest] was incorrect and should be reflected as "dividend" income. The disclosure form properly reported the income as "interest" income. Tax Training Institute, Inc. is a sub-chapter "S" corporation and therefore income of the corporation flows through the corporation to the shareholder retaining its original character to the shareholder. The income reported was my distributable share of interest income received by the corporation.

Assets:
Silver Screen Partners III is an investment of $5,000 in a limited partnership with Disney to produce motion pictures. This is a publicly offered limited partnership interest which was purchased sometime in 1989 or 1990. If it is essential, I can check records to determine the exact date of purchase and amend my 1990 disclosure statement. Please advise on the necessity to do so.

Accounts Receivable -- Law Practice: Upon election to the House, I closed my law practice and sent billings to clients for past services not yet paid. This listing is for the remaining balance. Please notify if an exact listing of names and specific amounts is required. If necessary to disclose specific names, I would request for privacy and client confidentiality reasons that their names not be part of the public record. No services were performed or fees charged subsequent to taking the oath of office.

Orton Properties: A letter to the Clerk, requesting amendment of my disclosure form to disclose the underlying assets of Orton Properties has been filed.

Thank you for your consideration and assistance.

Sincerely,

William H. Orton
Member of Congress

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 JUN 17 PM 12:56

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7

MC (Office Use Only)

Major R. Owens
(Full Name)

978 Clarkson Avenue
(Mailing Address)

Brooklyn, New York 11203

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 12th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Library Association (Jan. 6, 1990)	Two Lectures	$ 1,500	
	Cleveland State University (Feb. 23, 1990)	Speech	980	
	Washington State University (April 9, 1990)	Lectures	1500	
	Flint Public Library (April 22, 1990)	Speech	1000	
	Illinois Library Association (May 4, 1990)	Speech	500	
	National Restaurant Association (May 18, 1990)	Panel Participant	1000	
	Detroit Parent Advisory Council (May 25, 1990)	Speech	1000	
	New York Library Association (Sept. 14, 1990)	Speech	1200	
	Northwest Regional Laboratory (Oct. 2, 1990)	Speech	1000	
	Pratt Institute Library School (Oct. 6, 1990)	Lecture	1000	

For additional earned income, use next page

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Reporting Individual's Name
Major R. Owens

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Morehouse Research Institute (Oct. 10, 1990)	Lecture	$ 1000	
Virginia Library Association (Nov. 8, 1990)	Speech	1500	
Academic Library Assn of Ohio (Nov. 9, 1990)	Speech	500	
National Assn of Social Workers (Nov. 16, 1990)	Speech	1000	
Chicago Mercantile Exchange (Nov. 26, 1990)	Panelists	750	
Chicago Board of Trade (Nov. 26, 1990)	Panelists	750	
New York Public Library (Dec. 7, 1990)	Lecture	1500	

Reporting Individual's Name
Major R. Owens

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☒

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							

For additional assets and unearned income, use next page

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Reporting Individual's Name
Major R. Owens

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Major R. Owens

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☒

Example:	Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
American Library Association		Jan 6-7, 90	Roundtrip Air Travel to Chicago, Overnight food and lodging	
Cleveland State University		Feb 22-23	Roundtrip Air to Cleveland, Overnight food and lodging	
Washington State University		Apr 8-9	Rountrip Air to Pullman Washington, Overnight food and lodging	
Flint Public Library		Apr 22-23	Roundtrip Air Travel to Flint, Overnight Lodging, Self and wife	
Collins Center for Public Policy		April 22	Roundtrip Air to Fort Meyers Florida, 3 days food, lodging, self/spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Major R. Owens

PART VII Continued

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (x)
Illinois Library Association	May 3-4	Roundtrip Air To Springfield, Ill, Overnight food/lodging	
National Restaurant Association	May 18-20	Roundtrip Air To Chicago, 2 days food and lodging, self/wife	
Detroit Parent Advising Council	May 24-25	Roundtrip Air To Detroit, Overnight food/lodging	
New York Library Association	Sept. 13-14	Overnight Lodging at Newburgh, NY	
Northwest Regional Laboratory	Oct. 1-2	Roundtrip Air to Portland, Oregon, Overnight food/lodging	
Morehouse Research Institute	October 10	Roundtrip Air to Atlanta, Georgia	
Virginia Library Association	Nov. 8	Roundtrip Air to Richmond, Virginia	
Academic Library Assn of Ohio	Nov 9-10	Roundtrip Air to Cleveland, Overnight food/lodging	
National Social Workers	Nov. 15-16	Roundtrip Air to Boston, Overnight food, lodging	
Chicago Mercantile Exchange	Nov. 25-26	Roundtrip Air to Chicago, Overnight lodging, self, wife	
Anguilla Society	Nov. 17-19	Roundtrip Air to St Thomas Virgin Island, 2 days food and lodging, self and spouse	

Page A-4 continued

Reporting Individual's Name
Major R. Owens

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
President	Communovation Associates

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☒ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Major R. Owens	June 17, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990	FORM A For use by Members, officers, and employees

MAJOR R. OWENS
(Full Name)

978 CLARKSON AVENUE
(Mailing Address)

BROOKLYN, NY 11203

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 12th CD	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

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MC

(Office Use Only)

8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [XX]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$5,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Library Association (January 6, 1990)	Two Lectures	$1,500.	
	Cleveland State University (February 23, 1990)	Speech	980.	
	Washington State University (April 9, 1990)	Lectures	$1,500.	
	Flint Public Library (April 22, 1990)	Speech	$1,000.	
	Illinois Library Association (May 4, 1990)	Speech	500.	
	National Restaurant Association (May 18, 1990)	Panel Participant	$1,000.	
	Detroit Parent Advisory Council (May 25, 1990)	Speech	$1,000.	
	New York Library Association (September 14, 1990)	Speech	$1,200.	
	Northwest Regional Laboratory (October 2, 1990)	Speech	$1,000.	
	Pratt Institute Library School (October 6, 1990)	Lecture	$1,000.	

For additional earned income, use next page

Reporting Individual's Name
Major R. Owens

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Morehouse Research Institute (October 10, 1990)	Lecture	$1,000.	
Virginia Library Association (November 8, 1990)	Speech	$1,500.	
Academic Library Assn. of Ohio (November 9, 1990)	Speech	500.	
National Ass. of Social Workers(November 16, 1990)	Speech	$1,000.	
Chicago Mercantile Exchange (November 26, 1990)	Panelist	750.	
Chicago Board of Trade (November 26, 1990)	Panelist	750.	
New York Public Library (December 7, 1990)	Lecture	$1,500.	

Reporting Individual's Name
Major K. Owens

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE [x]

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							

For additional assets and unearned income, use next page

2966

Reporting Individual's Name
Major R. Owens

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Major R. Owens

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Library Association	January 6-7,1990	Roundtrip Air Travel from New York to Chicago Overnight food and lodging	
Cleveland State University	February 22-23,'90	Roundtrip Air Travel from Washington, DC to Cleveland Overnight food and lodging	
Washington State University	April 8-9,1990	Roundtrip Air Travel from New York to Pullman, Washington - Overnight food and lodging	
Flint Public Library	April 22-23,'90	Roundtrip Air Travel from Washington to Flint, MI Overnight food and lodging for self and spouse	
Collins Center for Public Policy	April 20-22,'90	Roundtrip Air Travel from Washington to Ft. Meyers, Florida - 2 Days food, lodging for self/spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Major R. Owens

PART VII Continued

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (x)
Illinois Library Association	May 3-4,'90	Roundtrip Air Travel from Washington to Springfield, ILL - Overnight Food/Lodging	
National Restaurant Assn.	May 18-20, 1990	Roundtrip Air Fare from Washington to Chicago 2 Days Food/Lodging for self & wife	
Detroit Parent Advisory Council	May 24-25 1990	Roundtrip Air Fare from Washington to Detroit Overnight Food/Lodging	
New York Library Association	Sept. 13-14, 1990	Overnight lodging in Newburgh, NY	
Northwest Regional Lab	Oct. 1-2, 1990	Roundtrip Air Fare from Washington to Portland, Oregon - Overnight Food/Lodging	
Morehouse Research Inst.	Oct. 10, 1990	Roundtrip Air Fare From Washington to Atlanta, Georgia	
Virginia Library Assn.	Nov. 8, 1990	Roundtrip Air Fare from Washington to Richmond, Virginia	
Academic Library Assn. of Ohio	Nov.9-10, 1990	Roundtrip Air Fare From Washington to Cleveland - Overnight Food/Lodging	

Continuation of A-4

Reporting Individual's Name
Major R. Owens

PART VII Continued

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (x)
National Social	Nov.	Roundtrip Air Fare From New York to Boston	
Workers Assn.	15-16,	Overnight Food/Lodging	
	1990		
Chicago	Nov.	Roundtrip Air Fare from Washington to Chicago	
Mercantile	25-26,	Overnight Food/Lodging for self and spouse	
Exchange	1990		
Anquilla	Nov.	Roundtrip Air Fare from Washington to St.	
Society	17-19,	Thomas Virgin Islands - 2 days Food/Lodging	
	1990	for self and spouse	

Reporting Individual's Name
Major R. Owens

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
President	Communovation Associates

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [XX] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [XX] No [ ] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Major R. Owens	June 27, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 28 AM 10: 20

MAY 24 1991

(6)

MC (Office Use Only)

Wayne Owens
(Full Name)

1728 LHOB House of Representatives
Washington, D.C. 20515
(Mailing Address)

Filer Status	✓ Member of the U S House of Representatives	State: Utah District: 2	Officer or Employee — Employing Office:
Report Type	✓ Annual (May 15)	Amendment	Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Rubin Management Co. (Paid Monthly)	Consultation, Commercial Real Estate	12,000.00	
	American Information Groups (Jan 31, 1990)	Honorarium	2,000.00	
	Bolivia Power Co. (July, 1990)	Honorarium	2,000.00	
	Butler, Fitzgerald and Potter, Inc. (Dec. 1990)	Honorarium	2,000.00	
	Charter National Insurance Co. (Dec. 1990)	"	2,000.00	
	International Thorasic Society (February, 1990)	"	300.00	
	Jordan Industries (December, 1990)	"	2000.00	X
	Leucadia National Corp (Dec. 1990)	"	2000.00	
	Phlcorp (July, 1990)	"	2000.00	
	Republic New York Corp. (Jan 1990)	"	2000.00	

For additional earned income, use next page (Cont'd)

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Reporting Individual's Name: Wayne Owens.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Republic New York Corp. (Dec 1990)	Honorarium	2,000.00	X
Denver Instruments Co. (Dec 1990)	Honorarium	2,000.00	X
Salt Lake City School District	Spouse Salary	NA.	
Deseret Book	Spouse Royalties	NA	

Reporting Individual's Name
Wayne Owens.

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Category of Value (X)									BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)									Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Shares of CSX Stock										X							X									
	Boulder Ranch Partnership				X													X									
	Family Home, Panguitch, Utah		X															X									
	Savings		X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name: Wayne Owens

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Zion's First Nat'l Bank, Salt Lake City.	Demand Note			X				
	Leon W. Harman	Demand Note		X					
	SD Abraham	Demand Note		X					
	American Investment Bank	Demand Note		X					
	Boulder Ranch Partnership	Ranching Partnership		X					

Reporting Individual's Name: Wayne Owens

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ✓

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ✓

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Wayne Owens

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Boulder Ranching Co., Boulder, Utah

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☑

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app. 6, § 104 and 18 U.S.C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Wayne Owens	May 24, 1991

GPO 1991 37-598 (m)

1991 JUL 10 AM 9:15

HAND DELIVERED

HOUSE OF REPRESENTATIVES
WASHINGTON, D. C. 20515

WAYNE OWENS
SECOND CONGRESSIONAL DISTRICT
UTAH

June 25, 1991

Clerk
U.S. House of Representatives
Office of Records and Registration
1036 Longworth H.O.B.
Washington, D.C. 20515-6612

1 MC

Gentlemen:

Re: Amendment to financial disclosure statement for calendar year 1990

My financial disclosure statement filed for calendar year 1990 should be amended in the two following instances:

1) Part VI, Tangible Gifts.
$175.00 for the Civil War video tapes

2) Part VII, Reimbursements and Gifts of Transportation, Lodging, Food, and Entertainment.
Airplane transportation:

Source: Leucadia Aviation
Date: July 19, 1990
Description: One way travel from Washington, D.C. to Salt Lake City, Utah
(Reimbursed through Official Expenses)

Source: S.D. Enterprises
Date: December 7 - December 20, 1990
Description: Roundtrip airtravel from Newark, New Jersey to Israel, Egypt, Jordan, Syria, Saudi Arabia, Oman, and Yemen
(Reimbursed by House Foreign Affairs Committee)

Sincerely,

Wayne Owens

Wayne Owens

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 11: 29

HAND DELIVERED

Michael G. Oxley
(Full Name)

2448 Rayburn H.O.B.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio District: 4th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) (9)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honorarna; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	SEE ATTACHED *			
	Shannon & Luchs Realtors	Spouse Commissions	NA	

For additional earned income, use next page

2979

MICHAEL G. OXLEY	PART I	HONORARIA
NATIONAL COAL ASSOCIATION	$ 500.00	1/4/90
WASHINGTON CAMPUS	500.00	3/23/90
CHEMICAL SPECIALTY MANUFACTURERS ASSOC.	500.00	5/16/90
OHIO CHAMBER OF COMMERCE	500.00	1/12/90
NATIONAL CABLE TELEVISION	1,500.00	1/23/90
CHICAGO BOARD OF TRADE	750.00	3/19/90
NATIONAL ASSOC. OF REALTORS	2,000.00	1/15/90
ABBOTT LABORATORY	1,000.00	6/8/90
NATIONAL ASSOC. OF CABLE T.V.	1,500.00	5/23/90
OHIO BELL TELEPHONE	1,000.00	2/9/90
AIR CONDITIONING AND REFRIGERATION INSTITUTE	1,500.00	6/21/90
PFIZER	1,000.00	3/19/90
BELLSOUTH INC.	1,000.00	12/19/90
B.P. AMERICA	2,000.00	4/3/90
KEYSTONE	500.00	1/17/90
AMERICAN AMUSEMENT MACHINE	1,000.00	5/2/90
TOBACCO INSTITUTE	2,000.00	1/8/90
SOCIETY OF AMERICAN FLORISTS	2,000.00	3/26/90
UNITED STATES TELEPHONE ASSOCIATION	1,000.00	4/27/90
CHICAGO MERCANTILE EXCHANGE	750.00	3/19/90
INDUSTRIAL TRUCK ASSOCIATION	2,000.00	9/13/90
COMPTEL	1,000.00	5/15/90
COLUMBIA GAS	2,000.00	5/30/90
NATIONAL ASSOC. OF BROADCASTERS	2,000.00	4/1/90
TOTAL:	29,500.00	
	2,650.00 - CHARITABLE CONTRIBUTIONS	

2981

Reporting Individual's Name

Michael G. Oxley

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	Ohio Bank & Savings Co.			X										X							X							
JT	Wright Patman Federal Credit Union			X										X						X								
S	Diamond Savings			X										X						X								
	Northwestern Mutual Life - IRA				X							X																
	Ohio Bank & Savings Co. - Keough Plan (not self directed)			X										X														
S	Sovran Bank, Virginia			X										X						X								

For additional assets and unearned income, use next page

Reporting Individual's Name: Michael G. Oxley

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

2982

2983

Reporting Individual's Name
Michael G. Oxley

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
See Attachment			

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

MICHAEL G. OXLEY PART VII TRANSPORTATION, FOOD & LODGING

UNITED STATES TELEPHONE ASSOCIATION R/T airfare & lodging for member Carefree, AZ Business Sessions with telephone officials	5/20/90 - 5/21/90
TOBACCO INSTITUTE One-Way airfare for member Food and lodging Palm Springs, CA/D.C. Panel on Energy & Commerce issues	1/18/90 - 1/20/90
FAR EAST STUDIES INSTITUTE R/T airfare for member and spouse D.C./Beijing, Hong Kong Food & lodging 'ict Finding Trip / Waiver received from Committee on Standards of Official Conduct	11/10/90 - 11/20/90 (2 day travel time)
COLUMBIA GAS R/T airfare for member C./Wilmington, D.E. eech on gas industry issues	5/30/90 - 5/31/90
NNY THOMPSON MEMORIAL GOLF TOURAMENT T airfare for member C./Sun Valley, ID d & lodging arity golf tournament participant	8/22/90 - 8/25/90
ATIONAL CABLE T.V. ASSOCIATION R/T airfare for spouse One-way for member Food & lodging D.C./Los Angeles/Palm Springs, CA Panel on Cable Television Issues	1/13/90 - 1/15/90
CROWN CONTROL R/T airfare for member D.C./Williamsburg, VA Food & Lodging Speech on Energy Issues	9/13/90 - 9/14/90
ABBOTT LABORATORIES One-way airfare for member Lodging D.C./Columbus, OH Tour facility and speech	6/8/90
NATIONAL ASSOCIATION OF BROADCASTERS R/T airfare for member D.C./Augusta, GA Speech on Telecommunications Issues	12/15/90
CHICAGO MERCANTILE EXCHANGE One-way airfare for member Columbus, OH/D.C. Tour of facility & speech to management	3/20/90

ALLTEL
R/T airfare for member
D.C./Cleveland, OH
lodging
Speech on telecommunications issues 9/6/90 - 9/7/90

PFIZER
One-way airfare for member
Chicago/Mansfield, OH
Tour facility & speech to management 3/19/90

GENERAL DYNAMICS
One-way airfare for member
D.C./Detroit/Columbus, OH
lodging
Official meetings on M-1 tank sales to Saudi Arabia 7/5/90 - 7/6/90

KEYSTONE CENTER
Food and lodging for member
Indian Wells, CA
Speech on Energy Issues 1/15/90 - 1/17/90

BELLSOUTH/OHIO BELL TELEPHONE COMPANY
R/T airfare for member
D.C./Orlando, FL
lodging
Tour of Hethrow, new fiber optic facility 11/25/90 - 11/26/90

CHICAGO MERCANTILE EXCHANGE
Airfare D.C./Chicago, IL for member
lodging
Tour of facilities & speech to management 3/18/90 - 3/19/90

YOUTHLINKS GOLF TOURNAMENT
R/T airfare for member
Bowling Green, OH/Indianapolis, IN
Indianapolis, IN/D.C.
food & lodging
Charity participant 6/24/90 - 6/25/90

CSX
R/T airfare for member & spouse
lodging
Greenbrier
White Sulpher Springs, W. VA
Panel discussion 5/27/90 - 5/29/90

USX
R/T airfare for member
D.C./Pittsburg, PA
Speech on clean air issues 9/5/90

NATIONAL CABLE TELEVISION ASSOCIATION
R/T airfare & lodging for member
Atlanta, GA
Roundtable discussion 5/20/90 - 5/21/90

NATIONAL ASSOCIATION OF BROADCASTERS
R/T airfare & lodging for member
Atlanta, GA
Panel on Telecommunications Issues 4/1/90 - 4/2/90

Reporting Individual's Name

Michael G. Oxley

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S.C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 9, 1991

GPO 1991 27-598 (nr)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 3:35
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Ronald C. Packard
(Full Name)

434 Cannon HOB / Washington D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 43	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Assoc. of American Rail Roads (4/7/90)	participation in roundtable	$1,000	
	American Medical Assoc. (3/15-18/90)	participation in roundtable	$1,000	
	American Society of Mechanical Engineers (2/27/90)	speech	$1,500	
	National Society of Professional Engineers (1/25/90) The Brookings Intitute (5/23/90)	speech speak on panel	$1,500 $ 400	
	Northrop Corporation (11/19/90) Chicago City Board of Trade (4/26/90)	speech/roundtable speech	$2,000 $ 750	
	Oceanspray Cranberries, Inc. (4/24/90) Chicago Mercantile Exchange (4/25/90)	speech speech	$2,000 $ 750	
	Rockwell International (3/2/90) Federal Express Corp. (4/20/90)	speech/roundtable speech	$2,000 $2,000	
	Tenneco, Inc. (10/7/90) General Atomics (5/29/90)	roundtable speech	$2,000 $1,000	
	ARCO (Atlantic Richfield Co.) (2/15/90) (11/14/90) Independent Bakers Assoc. (Rob't N. Pyle & Assoc)	speech speech	$2,000 $ 150	
	Los Angeles Times (4/9/90)	feature article	$ 250	

For additional earned income, use next page

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Reporting Individual's Name

Ronald C. Packard

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	1st National Bank of No. County-stock				X																						
JT	vacant lot - 180 acres San Luis Rey property, Oceanside CA			X													no income										
	Coin Collection		X																								
	Investment Diamonds			X																							
JT	Rancho Bernardo Savings Bank-stock Dissolved Oct.21, 1990 - total loss	X																									
JT	China Business Machines (name chgd.from Lady Robbin)		X														no income										

For additional assets and unearned income, use next page

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Reporting Individual's Name

Ronald C. Packard

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Pacific Pepper Tree, non-passive loss (Partnership terminated in 1990)											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	1st National Bank of North County	Unsecured Loan (paid off in 1990)			X				

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Reporting Individual's Name
Ronald C. Packard

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Bd. of Trade	Apr.27	Roundtrip airfare from D.C. to Chig.	
Danny Thompson Memorial Golf Tourn.	Aug.22-25	Roundtrip Airfare from San Diego to SunVally ID,Food Lodging	
San Diego Gas & Electric	Mar.1	Lodging and Meal	
Congressional Institute Inc. (Greenbrier)	Feb.22-24	Republican Conf. @ Princeton, Transportation, Food, Lodging	
Congressional Charity Golf Tourn.	Nov.9-11	Hotel accomodations and meals	
AMA Conference - Naples FL.	Mar.15-18	Roundtrip airfare from D.C. to FL., Lodging & meals	
EIA Conference - Captiva	Apr.9-12	Roundtrip airfare from Miami to Ft. Meyers to San Diego, Lodging & Meals	
Am. Assoc.of Rail Roads - Key Largo	Apr.6-8	Airfare from D.C. to Maimi, Meals, Lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Roanld C. Packard

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Director	Rancho Bernardo Savings Bank, Resigned Oct.19, 1990

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ron Packard	5-15-91

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 1:23
U.S. ... REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only) 5

Frank J. Pallone, Jr.
(Full Name)

29 Morrell Street
(Mailing Address)

Long Branch, NJ 07740

Filer Status	[x] Member of the U.S. House of Representatives	State: NJ District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

2993

Reporting Individual's Name

Frank J. Pallone, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income																**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	First Fidelity Bank of NJ - Accounts																										
	160 Brighton Ave. Long Branch, NJ	X											X					X									
	Congressional Credit Union - Accounts																										
	Washington, DC		X										X					X									

For additional assets and unearned Income, use next page

Reporting Individual's Name
Frank J. Pallone, Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name

Frank J. Pallone, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [x]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Frank J. Pallone, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated held on or before the date of filing during the current calendar year as an officer director trustee partner proprietor, representative, employee, or consultant of any corporation, firm partnership or other business enterprise any nonprofit organization, any labor organization or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [ ] NA [x]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Frank Pallone, Jr.	May, 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Frank J. Pallone, Jr.
(Full Name)

29 Morrell Street
(Mailing Address)

Long Branch, NJ 07740

Filer Status	[x] Member of the U.S. House of Representatives	State: NJ District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

(Office Use Only)

HAND DELIVERED

1991 MAY 31 AM 7:29

INSIDE MAIL

2998

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

Reporting Individual's Name

Frank J. Pallone, Jr.

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash. Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	First Fidelity Bank of NJ - Accounts																									
	160 Brighton Ave. Long Branch, NJ	X											X				X									
	Congressional Credit Union - Accounts																									
	Washington, DC		X										X				X									

For additional assets and unearned income, use next page

2999

Reporting Individual's Name

Frank J. Pallone, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

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Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

3000

Reporting Individual's Name
Frank J. Pallone,Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

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NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

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NONE [x]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Frank J. Pallone, Jr.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [x]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [x]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Frank Pallone, Jr.	May 15, 1991

COPY

3002

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 7:4 4:23

HAND DELIVERED

Leon E. Panetta
(Full Name)

15 Panetta Road
(Mailing Address)

Carmel Valley, California 93924

Filer Status	[X] Member of the U.S. House of Representatives	State California District: 16	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)		Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)		Article	$500	X
	ABC Corporation		Director's Fee	$6,000	
	Fairfax County Board of Education		Spouse Salary	NA	
	Citizens for Congressman Panetta		Spouse Salary	N/A	
	Honorarium:				
	Food Marketing Institute	01/90	Speech	2,000	
	Coleman/Bartlett Group	01/90	Speech	2,000	
	Siemans Corporation	01/90	Speech	1,500	
	California Bankers Association	02/90	Speech	1,500	
	American Advertising Association	03/90	Speech	2,000	
	Tax Executives Institute	03/90	Speech	2,000	
	Fay Improvement Company	03/90	Speech	2,000	
	The Wine Institute	05/90	Speech	1,000	

For additional earned income, use next page

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Reporting Individual's Name

Leon E. Panetta

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
The Washington Research Group	05/90	Speech	2,000	
The Brookings Institute	05/90	Speech	400	
Pacific Mutual	06/90	Speech	2,000	
Interstate Natural Gas Assn. of America	07/90	Speech	2,000	
New York Times	09/90	Article	150	
Pacific CEO Institute	11/12/90	Speech	2,000	
Fay Improvement Company	11/15/90	Speech	2,000	
UCLA Economic Forum	12/18/90	Speech	1,000	

Reporting Individual's Name

Leon E. Panetta

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	Commercial Rental - 50% Interest 232 Madison Street, Monterey, CA							X						X						X									
	Bank of America				X										X					X									
	Congress Federal Credit Union			X											X					X									
	Franchise Tax Board			X											X					X									
	Internal Revenue Service			X											X						X								
	Mony Financial Services				X										X						X								

For additional assets and unearned income, use next page

3005

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Leon E. Panetta

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
The below listed stock and bank accounts are held in joint tenancy with Sylvia Panetta (spouse) and Sylvia Panetta's mother. Sylvia Panetta's name is listed on the accounts for convenience only and she has no beneficial or equitable interest in the income or principal of the bank accounts.																											
Bank of America Corporation - stock			x								x								x								
Bank of America - Monterey, CA				x									x								x						
Wells Fargo - Monterey, CA					x								x									x					
Coast Federal - Monterey, CA					x								x									x					
World Savings - Monterey, CA				x									x							x							
Great Western - Monterey, CA					x								x									x					
First National - Monterey, CA			x										x						x								

Reporting Individual's Name

Leon E. Panetta

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name

Leon E. Panetta

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Food Marketing Institute	01/07/90 - 01/10/90	Transportation and accomodations relating to honorarium Monterey-Honolulu-Maui	
Committee for a Responsible Federal Budget	01/10/90 - 01/14/90	Transportation and accomodations relating to honorarium Maui-Monterey, California	
Government Investment Management Corporation	02/11/90 - 02/16/90	Transportation and accomodations relating to hororarium - Monterey-London-Paris-Monterey, California	
Fay Improvement Company	11/15/90	Travel relating to honorarium - Monterey-Palm Springs-Monterey	
UCLA Economic Forum	12/18/90	Travel relating to honorarium - Monterey-Los Angeles-Monterey	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Leon E. Panetta

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)

GPO 1991 [illegible]-598 (m)

3009

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10: 07
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Paul Michael Parker
(Full Name)

1504 Longworth H O B
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State Mississippi District 4	[ ] Officer or Employee	Employing Office.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Medical Association (February 21, 1990	Honorarium	$1,000.00	
	National Restaurant Association (March 6, 1990)	Honorarium	500.00	
	Mississippi State Medical Association (March 14, 1990)	Honorarium	1,000.00	
	National Restaurant Association (April 13, 1990)	Honorarium	1,000.00	
	Young Bankers Section of the Mississippi Bankers Association (April 19, 1990)	Honorarium	750.00	
	Assoc. Specialty Contractors, Inc. (April 20, 1990)	Honorarium	1,000.00	
	National Restaurant Association (April 25, 1990)	Honorarium	500.00	
	Board of Trade of the City of Chicago (May 17, 1990)	Honorarium	750.00	
	Chicago Mercantile Exchange (May 18, 1990)	Honorarium	750.00	
	South Central Bell (May 18, 1990)	Honorarium	1,500.00	

For additional earned income, use next page

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Reporting Individual's Name
Paul Michael Parker

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Bell Helicopter Textron (June 5, 1990)	Honorarium	$2,000.00	
Northrop (June 8, 1990)	Honorarium	2,000.00	
The Tobacco Institute (June 14, 1990)	Honorarium	2,000.00	
Distilled Spirits Council of the U.S. (Aug. 3, 1990)	Honorarium	2,000.00	
Mississippi Poultry Association (Sept. 27, 1990)	Honorarium	200.00	
National Funeral Directors Assn. (Oct. 19, 1990)	Honorarium	2,000.00	
Association of American Railroads (Nov. 15, 1990)	Honorarium	1,000.00	
Service Corporation International (Dec. 7, 1990)	Honorarium	2,000.00	
Cash America Investments, Inc. (Dec. 10, 1990)	Honorarium	1,000.00	
Urcarco Operating Company, Inc. (Dec. 11, 1990)	Honorarium	1,000.00	
Brookhaven Funeral Home, Inc.	Spouse	N/A	
Self Employed Attorney	Spouse	N/A	

Reporting Individual's Name
Paul Michael Parker

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Parker Funeral Homes, Inc., Brookhaven						X				X							X									
	Brookhaven Funeral Ins. Co., Brookhaven						X					X										X					
	Community Life Insurance Co. Brookhaven						X					X									X						
	Jackson One, Inc., Brookhaven, MS			X							X							X									
	Land, GFG Farm, Lincoln Co., Brookhaven						X					X						X									
	Land, House, Wesson, MS		X									X						X									

For additional assets and unearned income, use next page

3012

Reporting Individual's Name
Paul Michael Parker

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Land & Rental Building, 203 W. Congress St., Brookhaven, MS					X						X										X				
	American Funeral Assurance Company Amory, MS (Stock)		X								X								X							
S	Hominy Ridge, Inc. Franklin County, MS (Stock)		X								X							X								
	IRA'S-Bank of Franklin, Meadville, MS		X										X					X								
S	IRA'S-Bank of Franklin, Meadville, MS		X										X					X								
	Savings Account Trustmark Bank, Brookhaven, MS			X									X						X							

Reporting Individual's Name
Paul Michael Parker

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	State Bank & Trust Company, Brookhaven, MS	Personal Loan		X					
	Trustmark Bank, Brookhaven, MS	Mortgage on Rental Property			X				
	Trustmark Bank, Brookhaven, MS	Personal Loan			X				

Reporting Individual's Name: Paul Michael Parker

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Medical Association		Jan. 18-21 1990	Roundtrip Air Travel from Jackson, MS to Miami, FL Food & Lodging, 3 nights, Self and Spouse.	
Bell Textron		May 17-18 1990	Air Travel from Washington, DC to Ft. Worth, TX to Chicago, IL Food and Lodging, One night, Self	
National Restaurant Association		May 18-21 1990	Air Travel from Chicago, IL to Washington, DC Food and Lodging, 3 nights, Self and Spouse.	
Hudson Valley P A C		June 5-6 1990	Roundtrip Air Travel from Washington, DC to New York, NY Food and Lodging-one night, Self	
Northrop		May 29-30 1990	Roundtrip Air Travel from Jackson, MS to Los Angeles, CA Food and Lodging-one night, Self	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Continuation Sheet

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Mississippi Poultry Association		Sept. 15 1990	Air Travel from Jackson, MS to Destin, FL and from Destin, FL to Washington, DC, Self.	
National Funeral Directors Assn.		Oct. 31-Nov.1,1990	Roundtrip Air Travel from Jackson, MS to Louisville, KY Food and Lodging, one night, Self.	
Assn. of American Railroads		Nov. 9-12 1990	Air Travel from Jackson, MS to Ponte Vedra, FL and from Ponte Vedra, FL to Washington, DC, Food & Lodging 2 nights, Self.	
Service Corporation International		Dec. 10-11 1990	Roundtrip Air Travel from McComb, MS to Houston, TX, to Fort Worth, TX, to McComb, MS, Food & Lodging 1 Night, Self.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Paul M. Parker

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	Parker Funeral Homes, Inc., Brookhaven, MS
President	Community Life Insurance Company, Inc., Brookhaven, MS
President	Brookhaven Funeral Insurance Company, Inc., Brookhaven, MS

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement
N/A		

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL
Mike Parker

DATE (Month, Day, Year)
May 7, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Elizabeth Johnston Patterson
(Full Name)

1641 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: SC District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (13) (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Estate of Olin D. Johnston, Jr., N.C.M.	Conservator Commission	$1,389.25	
	Perrin, Perrin, Mann & Patterson (Law Firm) - Spouse	Partnership Draw	N/A	
	LISTA (Title Insurance Agency) - Spouse	Partnership Draw	N/A	

For additional earned income, use next page

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Reporting Individual's Name
Elizabeth J. Patterson

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
	House and Lot at 225 5th Street, S.E., Washington, D.C.					X						X									X					X
S	General Partners (Law Office Building, 200 Library St., Spartanburg, SC)					X											Partnership Income					X				
	Winn-Dixie Stores, Inc.						X				X											X				
S DC	Palmetto Bank Shares, Inc.								X		X												X			
S	Trust A of Estate D.F. Patterson, Sr.			X													Inc. from Estate Trust				X					
S	1/3 Undivided Interest 237 Acres in Laurens County, S.C.				X												Timber Sales	X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Elizabeth J. Patterson

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC JT	Accounts at the Palmetto Bank		x										x													
DC	The Seibels Bruce Group, Inc.		x								x									x						
DC	Eastman Kodak Company		x								x							x								
DC	The Coca-Cola Company		x								x							x								
DC	NBSC Corporation		x								x							x								
DC	General Electric Company		x								x							x								
DC	Mobil Corporation		x								x								x							
S	Shearson Lehman Brothers, Inc. (IRA's)		x										x								x					
	The Palmetto Bank Accounts		x										x						x							
S	Merrill Lynch (Keogh Plan)*						x				x		x									x				
	S.C. General Assembly Retirement			x													Payments at 59⅓	x								
	Pride Pipeline Company Lease		x														Royalties	x								
DC	National Liquid Reserve (Money Market)	x										x						x								
	½ Interest Vacant Lot, Spartanburg SC	x															None	x								
	Shearson Lehman Brothers, Inc. (IRA)		x																x							

*Self Directed - See Attached List of Securities (Schedule A)

Reporting Individual's Name: Elizabeth J. Patterson

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	House and Lot at 225 5th St., S.E., Washington, D.C.	X			4-30-90				X			
S	Merrill Lynch Keogh Plan	X	X		*							
DC	Florida Federal Savings & Loan				**							

*See Attached List of Transactions (Schedule B)
**Taken Over by RTC (Stock Worthless)

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Perpetual Savings Bank, F.S.B., Washington, D.C.	Mortgage on 225 5th Street, S.E., Washington, D.C.				X			

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Reporting Individual's Name
Elizabeth J. Patterson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
The German Marshall Foundation (Fact-Finding Tour)	Nov 8-15	Roundtrip Travel from Washington, D.C. to Republic of Germany, 7 Days Food & Lodging, Self and Spouse; Returned Nov. 19 After Travel at Own Expense	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Elizabeth J. Patterson

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Wofford College, Spartanburg, S.C.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C app 6, § 104 and 18 U.S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Elizabeth J. Patterson	May 15, 1991

GPO 1991 37-598 (m)

3023

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA GA 30301

1ST AMERICAN BANK OF GEORGIA, N.A.

SCHEDULE A

First American Bank — Statement of Assets — 12/31/90

Account Number 68-0123-04

Trustee U/A DTD 1/1/68 For
Dwight F. Patterson
P/U Perrin, Perrin, Mann, & Patterson

Shares	Common Stock	Value
2202.693	Cigna High Income	B
1250	Clayton Homes	C
275	Duriron Inc	B
200	Exxon Corp	B
1500	H & Q Health Care Fund	C
80	Johnson & Johnson	B
532	Lance Inc	B
600	Mercury General Corp	B
1075.508	Merrill Lynch Developing Capital Markets Fund	B
1559.51	New Economy Fund	C
100	One Price Clothing Store Inc	A
1388	Palmetto Bancshares Inc	C
1943.77	Putnam OTC Emerging Growth Fund	B
50	Sector Strategy Fund	B
1500	Synalloy Corp	B
1000	Tellabs Inc	B
2000	Templeton Global Income Fund	C

MEMBER FDIC

TRUST DIVISION
34 PEACHTREE ST. N.W.
ATLANTA, GA 30301

SCHEDULE A
(Contd)

1ST AMERICAN BANK
OF GEORGIA, N.A.

First American Bank | Statement of Assets | 12/31/90

Account Number 68-0123-04

Trustee U/A DTD 1/1/68 For
Dwight F. Patterson
P/U Perrin, Perrin, Mann, & Patterson

Shares	Common Stock	Value
90	Tudor Prime Fund	B
200	Warner Lambert Co	B

Units	Time Deposits	
33.69	First American Bank Money Market Account	A

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA, GA 30301

SCHEDULE B

1ST AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 1

ACCOUNT NUMBER 68-0123-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
01/03/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
01/22/90	ICM PPTY INVS INC SOLD 01/11/90 800 SHS @ 6.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $5015.47			12,464.88-
01/30/90	H & Q HEALTH CARE FUND SBI PURCHASED 01/09/90 1,500 SHS @ 10.125 P/SH THRU ML #718-03006			15,520.80
01/31/90	MERRILL LYNCH DEVELOPING CAPITAL MARKETS FUND 12/29/89 DIV. @ 9.87 REINVESTED 13.774 SHS			135.95
01/31/90	TEMPLETON GLOBAL FUND I 12/29/89 DIV. @ 7.82 REINVESTED 71.939 SHS			562.37
01/31/90	ARCHER DANIELS MIDLAND CO 12/12/89 REC'D 150 SHS AS STK DIVD			
01/31/90	PUTNAM OTC EMERGING GROWTH FUND 12/22/89 DIV. @ 7.80 REINVESTED 104.234 SHS			813.03
01/31/90	NEW ECONOMY FUND SBI 12/13/89 DIV. @ 23.48 REINVESTED 145.169 SHS			3,408.58
02/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
03/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.18
03/02/90	COMPANY CONTRIBUTION 1989		5,690.28	

MEMBER FDIC

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA, GA 30301

1ST AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 1/14/91 PAGE 2

ACCOUNT NUMBER 68-0123-04 TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
03/02/90	PYMT TO MERRILL LYNCH PIERCE FENNER & SMITH #718-03006		5,690.28-	
04/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
05/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.19
05/24/90	SCHLUMBERGER LTD SOLD 05/07/90 200 SHS @ 54.25 P/SH THRU ML #718-03006 W/PROCEEDS OF $10658.04			7,324.29-
05/24/90	SCHLUMBERGER LTD SOLD 05/07/90 50 SHS @ 54.25 P/SH THRU ML #718-03006 W/PROCEEDS OF $2665.09			1,831.07-
05/24/90	INGERSOLL RAND CO. SOLD 05/07/90 50 SHS @ 55.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $2726.94			1,970.29-
05/24/90	INGERSOLL RAND CO. SOLD 05/07/90 200 SHS @ 55.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $10905.44			7,881.16-
05/24/90	DRESSER INDUSTRIES INC SOLD 05/07/90 200 SHS @ 51.375 P/SH THRU ML #718-03006 W/PROCEEDS OF $10089.04			8,363.56-
05/24/90	DRESSER INDUSTRIES INC SOLD 05/07/90 50 SHS @ 51.375 P/SH THRU ML #718-03006 W/PROCEEDS OF $2522.84			2,090.89-
05/24/90	CIGNA HIGH INCOME SH SBI PURCHASED 05/08/90 2,000 SHS @ 7 P/SH THRU ML #718-03006			14,343.60

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TRUST DIVISION
34 PEACHTREE ST N.W
ATLANTA, GA 30301

1ST AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 3

ACCOUNT NUMBER 68-0123-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
05/29/90	SYNALLOY CORP PURCHASED 05/07/90 1,500 SHS @ 8 P/SH THRU ML #718-03006			12,300.15
06/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
06/28/90	ARCHER DANIELS MIDLAND CO SOLD 06/13/90 50 SHS @ 26.375 P/SH THRU ML #718-03006 W/P OF $1291.60			1,000.78-
06/28/90	ARCHER DANIELS MIDLAND CO SOLD 06/13/90 400 SHS @ 26.375 P/SH THRU ML #718-03006 W/P OF $10330.45			8,006.23-
06/28/90	TEMPLETON GLOBAL INCOME FUND INC. PURCHASED 06/13/90 2,000 SHS @ 7.875 P/SH THRU ML #718-03006			16,114.15
07/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
08/01/90	CLAYTON HOMES, INC. PURCHASED 06/27/90 1,000 SHS @ 10.625 P/SH THRU ML #718-03006			10,885.85
08/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
08/20/90	CIGNA HIGH INCOME SH SBI 7/23 DIV @ 6.39 REINVESTED 26.132 SHS			180.00
09/04/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.21
09/19/90	CIGNA HIGH INCOME SH SBI 8/15 DIV. @ 6.61 REINVESTED 27.587 SHS			182.35

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TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA, GA 30301

1ST AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 4

ACCOUNT NUMBER 68-0123-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
09/19/90	MERRILL LYNCH DEVELOPING CAPITAL MARKETS FUND 8/17 DIV. @ 10.80 REINVESTED 52.798 SHS			570.22
10/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
10/24/90	CIGNA HIGH INCOME SH SBI 9/24 DIV. @ 6.05 REINVESTED 30.525 SHS			184.83
11/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
11/20/90	TEMPLETON GLOBAL FUND I 10/22 DIV. @ 4.96 REINVESTED 37.826 SHS			187.58
11/20/90	TEMPLETON GLOBAL FUND I 10/25 DIV. @ 6.06 REINVESTED 216.058 SHS			1,309.31
12/03/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.19
12/06/90	THE SECTOR STRATEGY FUND PURCHASED 11/05/90 50 SHS @ 100.00 P/SH THRU ML #718-03006			5,000.00
12/13/90	CIGNA HIGH INCOME SH SBI 11/27 DIV. @ 4.78 REINVESTED 77.708 SHS			371.44
12/13/90	SECTOR STRATEGY FUND BGT 11/13/90 50 SHS @ 100.00 P/SH			5,000.00
12/26/90	TEMPLETON GLOBAL FUND I 2,671.15 SHS NAME CHANGED TO TEMPLETON SMALLER COS. GROWTH FN INC			15,995.73-

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TRUST DIVISION
34 PEACHTREE ST N.W
ATLANTA, GA 30301

1ST AMERICAN BANK
OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 1/14/91 PAGE 5

ACCOUNT NUMBER 68-0123-04 TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
12/26/90	TEMPLETON SMALLER COS. GROWTH FN INC 2,671.15 SHS NAME CHANGE FROM TEMPLETON GLOBAL FUND I			15,995.73

MEMBER FDIC

LIZ PATTERSON
4TH DISTRICT, SOUTH CAROLINA
1641 LONGWORTH BUILDING
202-225-6030

DISTRICT OFFICES
P.O. Box 1330
SPARTANBURG, SC 29304
803-582-8422

P.O. Box 10408—FEDERAL STATION
GREENVILLE, SC 29603
803-232-1141

P.O. Box 804
UNION, SC 29378
803-427-2208

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEES
BANKING, FINANCE AND URBAN AFFAIRS
SUBCOMMITTEES
ECONOMIC STABILIZATION
FINANCIAL INSTITUTIONS SUPERVISION, REGULATION AND INSURANCE
HOUSING AND COMMUNITY DEVELOPMENT
VETERANS AFFAIRS
SUBCOMMITTEES
HOSPITALS AND HEALTH CARE
EDUCATION, TRAINING AND EMPLOYMENT
SELECT COMMITTEE ON HUNGER

May 30, 1991

HAND DELIVERED

The Honorable Louis Stokes
House Committee on Standards
HT-2 U.S. Capitol
Washington, D.C. 20515

MC (15)

U.S. H.R. 1991 MAY 30 PM 4:16

Dear Mr. Chairman:

RE: Financial Disclosure Form

In response to your letter of May 22, 1991, I submit the following additional information:

1. You requested that I indicate the amount of interest earned on the Palmetto Bank accounts held jointly with my spouse and the accounts of my dependent children. The interest on these accounts should have been reported as Category II, $201 to $1,000. I have made and initialled this change on the form you enclosed with your letter.

2. You requested that I indicate the type of income on my Shearson Lehman Brothers, Inc. (IRA). The income on this IRA should have been reported as Interest Income. In addition, the amount of interest income was mistakenly reported as Category II. It should have been reported as Category IV, $2,501 - $5,000. I have made and initialled this change on the form you enclosed with your letter.

3. You requested information on the dispensation of the 1/5th interest in Perrin, Perrin, Mann & Patterson and 1/5th interest in Library Street Title Insurance Agency which were reported on the 1989 form, but not the 1990 form. These items were omitted in error caused by the design change in the new form. As a General Partner in these firms, the income received by my spouse from them is earned income and was properly reported on the 1990 form. Since Assets are normally associated, and therefore reported, with unearned income, there was no clear indication of how or where to report these partnerships as assets. Following the form of Parts II and III of the 1990 form, my spouse's 1/5 interest in Perrin, Perrin, Mann & Patterson would be reported with a valuation of Category C, $15,001 - $50,000. My spouse's 1/5 interest in Library Street Title Insurance would be reported with a valuation of Category A, less than $1,001.

HAND DELIVERED

1991 MAY 30 PM 4:16

I certainly regret the ommission of this data. If you have any further questions, please do not hesitate to contact me.

Cordially,

Elizabeth J. Patterson
Member of Congress

EJP:chc

Enclosure

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers and employees

1991 MAY 15 4:59

HAND DELIVERED

HAND DELIVERED

MC (Office Use Only)

Elizabeth Johnston Patterson
(Full Name)

1641 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State SC District 4th	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
Estate of Olin D. Johnston, Jr., N.C.M.	Conservator Commission	$1,389.25	
Perrin, Perrin, Mann & Patterson (Law Firm) - Spouse	Partnership Draw	N/A	
LISTA (Title Insurance Agency) - Spouse	Partnership Draw	N/A	

For additional earned income, use next page

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Reporting Individual's Name
Elizabeth J. Patterson

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
✓	House and Lot at 225 5th Street, S.E., Washington, D.C.					X						X									X						X
✓ S	General Partners (Law Office Building, 200 Library St., Spartanburg, SC)					X											Partnership Income					X					
✓	Winn-Dixie Stores, Inc.						X				X											X					
✓ S DC	Palmetto Bank Shares, Inc.								X		X												X				
✓ S	Trust A of Estate D.F. Patterson, Sr.			X													Inc. from Estate Trust				X						
✓ S	1/3 Undivided Interest 237 Acres in Laurens County, S.C.				X												Timber Sales	X									

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Elizabeth J. Patterson

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC JT	Accounts at the Palmetto Bank		X										X						X								
DC	The Seibels Bruce Group, Inc.		X								X									X							
DC	Eastman Kodak Company		X								X							X									
DC	The Coca-Cola Company		X								X							X									
DC	NBSC Corporation		X								X							X									
DC	General Electric Company		X								X							X									
DC	Mobil Corporation		X								X								X								
S	Shearson Lehman Brothers, Inc. (IRA's)		X										X								X						
	The Palmetto Bank Accounts		X										X						X								
S	Merrill Lynch (Keogh Plan)*						X				X		X									X					
	S.C. General Assembly Retirement			X													Payments at 59½	X									
	Pride Pipeline Company Lease		X														Royalties	X									
DC	National Liquid Reserve (Money Market)	X										X						X									
	½ Interest Vacant Lot, Spartanburg SC	X															None	X									
	Shearson Lehman Brothers, Inc. (IRA)		X										X						X								

*Self Directed - See Attached List of Securities (Schedule A)

Reporting Individual's Name

Elizabeth J. Patterson

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	House and Lot at 225 5th St., S.E., Washington, D.C.	X			4-30-90				X			
S	Merrill Lynch Keogh Plan	X	X		*							
DC	Florida Federal Savings & Loan				**							

*See Attached List of Transactions (Schedule B)
**Taken Over by RTC (Stock Worthless)

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Perpetual Savings Bank, F.S.B., Washington, D.C.	Mortgage on 225 5th Street, S.E., Washington, D.C.				X			

Reporting Individual's Name
Elizabeth J. Patterson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
The German Marshall Foundation (Fact-Finding Tour)	Nov 8-15	Roundtrip Travel from Washington, D.C. to Republic of Germany, 7 Days Food & Lodging, Self and Spouse, Returned Nov. 19 After Travel at Own Expense	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Elizabeth J. Patterson

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Trustee	Wofford College, Spartanburg, S.C.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S.C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL

Elizabeth J. Patterson

DATE (Month, Day, Year)

May 15, 1991

GPO 1991 J7 598 (m)

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA GA 30301

1ST AMERICAN BANK OF GEORGIA, N.A.

SCHEDULE A

First American Bank — Statement of Assets — 12/31/90

Account Number 68-0123-04

Trustee U/A DTD 1/1/68 For
Dwight F. Patterson
P/U Perrin, Perrin, Mann, & Patterson

Shares	Common Stock	Value
2202.693	Cigna High Income	B
1250	Clayton Homes	C
275	Duriron Inc	B
200	Exxon Corp	B
1500	H & Q Health Care Fund	C
80	Johnson & Johnson	B
532	Lance Inc	B
600	Mercury General Corp	B
1075.508	Merrill Lynch Developing Capital Markets Fund	B
1559.51	New Economy Fund	C
100	One Price Clothing Store Inc	A
1388	Palmetto Bancshares Inc	C
1943.77	Putnam OTC Emerging Growth Fund	B
50	Sector Strategy Fund	B
1500	Synalloy Corp	B
1000	Tellabs Inc	B
2000	Templeton Global Income Fund	C

MEMBER FDIC

TRUST DIVISION
34 PEACHTREE ST. N.W.
ATLANTA, GA 30301

SCHEDULE A
(Contd)

1ST AMERICAN BANK
OF GEORGIA, N.A.

First American Bank | Statement of Assets | 12/31/90

Account Number 68-0123-04

Trustee U/A DTD 1/1/68 For
Dwight F. Patterson
P/U Perrin, Perrin, Mann, & Patterson

Shares	Common Stock	Value
90	Tudor Prime Fund	B
200	Warner Lambert Co	B

Units	Time Deposits	
33.69	First American Bank Money Market Account	A

MEMBER F.D.I.C.

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA GA 30301

SCHEDULE B

1ST AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 1

ACCOUNT NUMBER 68-0100-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
01/03/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
01/22/90	ICM PPTY INVS INC SOLD 01/11/90 800 SHS @ 6.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $5015.47			12,464.88-
01/30/90	H & Q HEALTH CARE FUND SBI PURCHASED 01/09/90 1,500 SHS @ 10.125 P/SH THRU ML #718-03006			15,520.80
01/31/90	MERRILL LYNCH DEVELOPING CAPITAL MARKETS FUND 12/29/89 DIV. @ 9.87 REINVESTED 13.774 SHS			135.95
01/31/90	TEMPLETON GLOBAL FUND I 12/29/89 DIV. @ 7.82 REINVESTED 71.939 SHS			562.57
01/31/90	ARCHER DANIELS MIDLAND CO 12/12/89 REC'D 150 SHS AS STK DIVD			
01/31/90	PUTNAM OTC EMERGING GROWTH FUND 12/22/89 DIV. @ 7.80 REINVESTED 104.234 SHS			813.03
01/31/90	NEW ECONOMY FUND SBI 12/13/89 DIV. @ 23.48 REINVESTED 145.169 SHS			3,408.58
02/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
03/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.18
03/02/90	COMPANY CONTRIBUTION 1989		5,690.28	

MEMBER FDIC

TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA, GA 30301

1st AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 2

ACCOUNT NUMBER 68-0123-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
03/02/90	PYMT TO MERRILL LYNCH PIERCE FENNER & SMITH #718-03006		5,690.28-	
04/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
05/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.19
05/24/90	SCHLUMBERGER LTD SOLD 05/07/90 200 SHS @ 54.25 P/SH THRU ML #718-03006 W/PROCEEDS OF $10658.04			7,324.29-
05/24/90	SCHLUMBERGER LTD SOLD 05/07/90 50 SHS @ 54.25 P/SH THRU ML #718-03006 W/PROCEEDS OF $2665.09			1,831.07-
05/24/90	INGERSOLL RAND CO. SOLD 05/07/90 50 SHS @ 55.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $2726.94			1,970.29-
05/24/90	INGERSOLL RAND CO. SOLD 05/07/90 200 SHS @ 55.50 P/SH THRU ML #718-03006 W/PROCEEDS OF $10905.44			7,881.16-
05/24/90	DRESSER INDUSTRIES INC SOLD 05/07/90 200 SHS @ 51.375 P/SH THRU ML #718-03006 W/PROCEEDS OF $10089.04			8,363.56-
05/24/90	DRESSER INDUSTRIES INC SOLD 05/07/90 50 SHS @ 51.375 P/SH THRU ML #718-03006 W/PROCEEDS OF $2522.84			2,090.89-
05/24/90	CIGNA HIGH INCOME SH SBI PURCHASED 05/08/90 2,000 SHS @ 7 P/SH THRU ML #718-03006			14,343.60

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TRUST DIVISION
34 PEACHTREE ST NW
ATLANTA GA 30301

1st AMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA — TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 — 1/14/91 — PAGE 3

ACCOUNT NUMBER 66-0123-04 — TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN — ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
05/29/90	SYNALLOY CORP PURCHASED 05/07/90 1,500 SHS @ 8 P/SH THRU ML #718-03006			12,300.15
06/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
06/28/90	ARCHER DANIELS MIDLAND CO SOLD 06/13/90 50 SHS @ 26.375 P/SH THRU ML #718-03006 W/P OF $1291.60			1,000.78-
06/28/90	ARCHER DANIELS MIDLAND CO SOLD 06/13/90 400 SHS @ 26.375 P/SH THRU ML #718-03006 W/P OF $10330.45			8,006.23-
06/28/90	TEMPLETON GLOBAL INCOME FUND INC. PURCHASED 06/13/90 2,000 SHS @ 7.875 P/SH THRU ML #718-03006			16,114.15
07/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
08/01/90	CLAYTON HOMES, INC. PURCHASED 06/27/90 1,000 SHS @ 10.625 P/SH THRU ML #718-03006			10,885.85
08/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
08/20/90	CIGNA HIGH INCOME SH SBI 7/23 DIV @ 6.89 REINVESTED 26.132 SHS			180.00
09/04/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.21
09/19/90	CIGNA HIGH INCOME SH SBI 8/15 DIV. @ 6.61 REINVESTED 27.587 SHS			182.35

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TRUST DIVISION
34 PEACHTREE ST N.W
ATLANTA, GA 30301

1STAMERICAN BANK OF GEORGIA, N.A.

FIRST AMERICAN BANK HRIO & IRA TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 1/14/91 PAGE 4

ACCOUNT NUMBER 68-0123-04 TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & HAHN ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
09/19/90	MERRILL LYNCH DEVELOPING CAPITAL MARKETS FUND 8/17 DIV. @ 10.80 REINVESTED 52.798 SHS			570.22
10/02/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
10/24/90	CIGNA HIGH INCOME SH SBI 9/24 DIV. @ 6.05 REINVESTED 30.525 SHS			184.83
11/01/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.20
11/20/90	TEMPLETON GLOBAL FUND I 10/22 DIV. @ 4.96 REINVESTED 37.826 SHS			187.58
11/20/90	TEMPLETON GLOBAL FUND I 10/25 DIV. @ 6.06 REINVESTED 216.058 SHS			1,309.31
12/03/90	FIRST AMERICAN BANK MONEY MARKET ACCOUNT INTEREST REINVESTED			.19
12/06/90	THE SECTOR STRATEGY FUND PURCHASED 11/05/90 50 SHS @ 100.00 P/SH THRU ML 8718-03006			5,000.00
12/13/90	CIGNA HIGH INCOME SH SBI 11/27 DIV. @ 4.78 REINVESTED 77.708 SHS			371.44
12/13/90	SECTOR STRATEGY FUND BGT 11/13/90 50 SHS @ 100.00 P/SH			5,000.00
12/26/90	TEMPLETON GLOBAL FUND I 2,671.15 SHS NAME CHANGED TO TEMPLETON SMALLER COS. GROWTH FN INC			15,995.73-

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TRUST DIVISION
34 PEACHTREE ST N W
ATLANTA, GA 30301

1ST AMERICAN BANK
OF GEORGIA, N.A.

FIRST AMERICAN BANK HR10 & IRA TRANSACTIONS FOR PERIOD 01/01/90 - 12/31/90 1/14/91 PAGE 5

ACCOUNT NUMBER 68-0123-04 TRUSTEE U/A DTD 1/1/68 FOR DWIGHT F PATTERSON P/U PERRIN PERRIN & MANN ADM OFF - 013

		INCOME	PRINCIPAL	INVESTMENTS
12/26/90	TEMPLETON SMALLER COS. GROWTH FN INC 2,671.15 SHS NAME CHANGE FROM TEMPLETON GLOBAL FUND I			15,995.73

MEMBER FDIC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 1:00

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only) 12

BILL PAXON
(Full Name)

251 WEDGEWOOD DRIVE
(Mailing Address)

WILLIAMSVILLE, NEW YORK 14221

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 31	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [X]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D.C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
BILL PAXON

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	THRIFT SAVINGS RETIREMENT PLAN VOLUNTARILY DISCLOSED		X														GOV'T/EQUITY SECURITIES		X								
	M & T BANK, BUFFALO, NEW YORK MORTGAGE ESCROW ACCOUNT		X										X					X									
	VOLUNTARILY DISCLOSED																										

For additional assets and unearned income, use next page

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Reporting Individual's Name
BILL PAXON

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	M & T BANK, BUFFALO, NEW YORK	MORTGAGE ON 251 WEDGEWOOD DRIVE WILLIAMSVILLE, NEW YORK				X			
		PERSONAL RESIDENCE, VOLUNTARILY DISCLOSED							
	BANK OF AKRON, AKRON, NEW YORK	PERSONAL LOAN	X						

Reporting Individual's Name
BILL PAXON

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
THE CONGRESSIONAL INSTITUTE	2/22-24/90	TRAIN FROM WASH. D.C. - PRINCETON, 2 DAYS FOOD & LODGING	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
BILL PAXON

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
DIRECTOR	ERIE COUNTY AGRICULTURAL SOCIETY, HAMBURG, NEW YORK (Resigned August 20, 1990)
TRUSTEE	ST. JOSEPH'S COLLEGIATE INSTITUTE, BUFFALO, NEW YORK

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C app 6, § 101 et seq). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	MAY 14, 1991

GPO 1991 37-598 (m)

3050

Form **1040** Department of the Treasury-Internal Revenue Service **U.S. Individual Income Tax Return 1990**

COPY

For the year January-December 31 1990 or other tax year beginning 1990 ending 19 OMB No 1545-0074

Your first name and initial: L. WILLIAM Last name: PAXON Your social security number: 115-46-3307

If a joint return spouse's first name and initial: Last name: Spouse's social security no

Home address (number and street) (If a P.O. box see page 9): 251 WEDGEWOOD Apt no

City town or post office state and ZIP code (If you have a foreign address see page 9): WILLIAMSVILLE NEW YORK 14221

For Privacy Act and Paperwork Reduction Act Notice, see Instructions

Presidential Election Campaign PAXO

Do you want $1 to go to this fund? [X] Yes [ ] No

If joint return, does your spouse want $1 to go to this fund? [ ] Yes [ ] No

Note: Checking "Yes" will not change your tax or reduce your refund

Filing Status (Check only one box)

1 [X] Single (See page 10 to find out if you can file as head of household)

2 [ ] Married filing joint return (even if only one had income)

3 [ ] Married filing separate return Enter spouse's social security number above and full name here ▶

4 [ ] Head of household (with qualifying person) (See page 10) If the qualifying person is your child but not your dependent, enter this child's name here ▶

5 [ ] Qualifying widow(er) with dependent child (year spouse died ▶ 19) (See page 10)

Exemptions (See Instructions on page 10)

6a [X] **Yourself** If your parent (or someone else) can claim you as a dependent on his or her tax return do not check box 6a But be sure to check the box on line 33b on page 2

b [ ] **Spouse**

No of boxes checked on 6a and 6b: 1

c **Dependents**

(1) Name (first initial and last name)	(2) Check if under age 2	(3) If age 2 or older dependent's social security number	(4) Dependent's relationship to you	(5) No of months lived in your home in 1990

If more than 6 dependents see Instructions on page 11

No of your children on 6c who:

● lived with you

● didn't live with you due to divorce or separation (see page 11)

No of other dependents on 6c

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement check here ▶ [ ]

Add numbers entered on lines above ▶ 1

e Total number of exemptions claimed 1

Income (Attach Copy B of your Forms W-2 W-2G and W-2P here)

7	Wages salaries tips etc (attach Form(s) W-2)		7 87,440.
8a	**Taxable** interest income (also attach Schedule B if over $400)		8a 44.
b	**Tax-exempt** interest income DON'T include on line 8a	8b	
9	Dividend income (also attach Schedule B if over $400)		9
10	Taxable refunds of state and local income taxes, if any, from worksheet on page 14		10 1,247.
11	Alimony received		11
12	Business income or (loss) (attach Schedule C)		12
13	Capital gain or (loss) (attach Schedule D)		13
14	Capital gain distributions not reported on line 13		14
15	Other gains or (losses) (attach Form 4797)		15
16a	Total IRA distributions	16a 16b Taxable amount	16b
17a	Total pensions and annuities	17a 17b Taxable amount	17b
18	Rents royalties partnerships estates trusts etc (attach Schedule E)		18
19	Farm income or (loss) (attach Schedule F)		19
20	Unemployment compensation (insurance)		20
21a	Social security benefits	21a 21b Taxable amount	21b
22	Other income (list type and amount)		22
23	Add the amounts shown in the far right column for lines 7 through 22 This is your **total income** ▶		23 88,731.

If you do not have a W-2 see page 8

Attach check or money order on top of any Forms W-2 W-2G and W-2P

Adjustments to Income (See Instructions on page 17)

24a	Your IRA deduction, from applicable worksheet on page 17 or 18	24a	
b	Spouse's IRA deduction, from applicable worksheet on page 17 or 18	24b	
25	One-half of self-employment tax	25	
26	Self-employed health insurance deduction from worksheet on page 18	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid Recipient's SSN ▶	29	
30	Add lines 24a through 29 ▶		30

Adjusted Gross Income

31	Subtract line 30 from line 23 This is your **adjusted gross income** If this amount is less than $20 264 and a child lived with you see page 23 to find out if you can claim the "Earned Income Credit" on line 57 ▶		31 88,731.

M7B

'27 90

3052

1 Control number		OMB No 1545-0008			
2 Employer's name, address, and ZIP code SERGEANT AT ARMS U.S. HOUSE OF REPRESENTATIVES WASHINGTON DC 20515			6 Statutory employee ☐ Deceased ☐ Pension plan ☒ Legal rep ☐ 942 emp ☐ Subtotal ☐ Deferred compensation ☒ Void ☐		
			7 Allocated tips .00	8 Advance EIC payment .00	
			9 Federal income tax withheld 16136.31	10 Wages, tips, other compensation 87439.66	
3 Employer's identification number 53-6002522	4 Employer's state I.D. number 536002522		11 Social security tax withheld 3924.45	12 Social security wages 51300.00	
5 Employee's social security number 115-46-3307			13 Social security tips .00	14 Nonqualified plans .00	
19 Employee's name, address and ZIP code BILL PAXON			15 Dependent care benefits .00	16 Fringe benefits incl. in Box 10 .00	
			17 D 7977.00 .00 .00	18 Other .00 .00 .00	
20	21		22	23	
24 State income tax 5264.06	25 State wages, tips, etc. 87439.66	26 Name of state NY	27 Local income tax .00	28 Local wages, tips, etc .00	29 Name of locality

Copy B To be filed with employee's federal tax return

Dept. of the Treasury—Internal Revenue Service

Form **W-2 Wage and Tax Statement 1990**

IRS App. 31-0455440

COPY

This information is being furnished to the Internal Revenue Service.

3 15079 0409

L. WILLIAM PAXON 115-46-3307

Form 1040 (1990) Page 2

Tax Computation	32 Amount from line 31 (adjusted gross income)	32	88,731.
	33a Check if [ ] You were 65 or older [ ] Blind. [ ] Spouse was 65 or older [ ] Blind. Add the number of boxes checked above and enter the total here ▶ 33a		
	b If your parent (or someone else) can claim you as a dependent, check here ▶ 33b [ ]		
If you want IRS to figure your tax, see instructions on page 19	c If you are married filing a separate return and your spouse itemizes deductions, or you are a dual-status alien, see page 19 and check here ▶ 33c [ ]		
	34 Enter the larger of: • Your standard deduction (from page 20 that applies to you) OR • Your itemized deductions (from Schedule A, line 27). If you itemize, attach Schedule A and check here ▶ [X]	34	30,635.
	35 Subtract line 34 from line 32	35	58,096.
	36 Multiply $2,050 by the total number of exemptions claimed on line 6e	36	2,050.
	37 **Taxable income.** Subtract line 36 from line 35. (If line 36 is more than line 35, enter -0-.)	37	56,046.
	38 Enter tax. Check if from a [ ] Tax Table b [X] Tax Rate Schedules or c [ ] Form 8615. (If any is from Form(s) 8814, enter that amount here ▶ d)	38	13,614.
	39 Additional taxes. Check if from a [ ] Form 4970 b [ ] Form 4972	39	
	40 Add lines 38 and 39 ▶	40	13,614.
Credits (See instructions on page 21.)	41 Credit for child and dependent care expenses (attach Form 2441) — 41		
	42 Credit for the elderly or the disabled (attach Schedule R) — 42		
	43 Foreign tax credit (attach Form 1116) — 43		
	44 General business credit. Check if from a [ ] Form 3800 or b [ ] Form (specify) — 44		
	45 Credit for prior year minimum tax (attach Form 8801) — 45		
	46 Add lines 41 through 45	46	
	47 Subtract line 46 from line 40. (If line 46 is more than line 40, enter -0-.) ▶	47	13,614.
Other Taxes	48 Self-employment tax (attach Schedule SE)	48	
	49 Alternative minimum tax (attach Form 6251)	49	
	50 Recapture taxes. Check if from a [ ] Form 4255 b [ ] Form 8611	50	
	51 Social security tax on tip income not reported to employer (attach Form 4137)	51	
	52 Tax on an IRA or a qualified retirement plan (attach Form 5329)	52	
	53 Advance earned income credit payments from Form W-2	53	
	54 Add lines 47 through 53. This is your **total tax** ▶	54	13,614.
Payments Attach Forms W-2, W-2G, and W-2P to front.	55 Federal income tax withheld (if any is from Form(s) 1099, check ▶ [ ]) — 55 16,136.		
	56 1990 estimated tax payments and amount applied from 1989 return — 56		
	57 **Earned income credit** — 57		
	58 Amount paid with Form 4868 (extension request) — 58		
	59 Excess social security tax and RRTA tax withheld — 59		
	60 Credit for Federal tax on fuels (attach Form 4136) — 60		
	61 Regulated investment company credit — 61		
	62 Add lines 55 through 61. These are your **total payments** ▶	62	16,136.
Refund or Amount You Owe	63 If line 62 is more than line 54, enter amount **OVERPAID** ▶	63	2,522.
	64 Amount of line 63 to be **REFUNDED TO YOU** ▶	64	2,522.
	65 Amount of line 63 to be **APPLIED TO YOUR 1991 ESTIMATED TAX** ▶ 65		
	66 If line 54 is more than line 62, enter **AMOUNT YOU OWE**. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1990 Form 1040" on it.	66	
	67 Estimated tax penalty — 67		

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature ▶ Date Your occupation CONGRESSMAN

Keep a copy of this return for your records. Spouse's signature (if joint return, BOTH must sign) ▶ Date Spouse's occupation

COPY

Paid Preparer's Use Only Preparer's signature ▶ Date 04/09/91 Check if self-employed [ ] Preparer's social security no. 108-34-5209

Firm's name (or yours if self-employed) and address ▶ CAMPBELL, BOLAS & ASSOCIATES, 10535 MAIN STREET PO BOX Y, CLARENCE, NEW YORK

E.I. No. 16-1047035 ZIP code 14031

H188

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SCHEDULES A&B (Form 1040)
Department of the Treasury Internal Revenue Service

Schedule A – Itemized Deductions

▶ Attach to Form 1040. ▶ See Instructions for Schedules A and B (Form 1040).

OMB No 1545-0074
1990
Attachment Sequence No 07

Name(s) shown on Form 1040: L. WILLIAM PAXON

Your social security number: 115-46-3307

Medical and Dental Expenses		**Caution.** *Do not include expenses reimbursed or paid by others.*			
	1	Medical and dental expenses (See page 27 of the Instructions) *	1	277.	
	2	Enter amount from Form 1040, line 32 [2] 88,731.			
	3	Multiply the amount on line 2 by 7.5% (.075) Enter the result	3	6,655.	
	4	Subtract line 3 from line 1. Enter the result. If less than zero, enter -0- ▶ 4			0.
Taxes You Paid (See Instructions on page 27)	5	State and local income taxes	5	5,264.	
	6	Real estate taxes	6	3,655.	
	7	Other taxes (List-include personal property taxes) ▶	7		
	8	Add the amounts on lines 5 through 7. Enter the total ▶ 8			8,919.
Interest You Paid (See Instructions on page 27)	9a	Deductible home mortgage interest paid to financial institutions and reported to you on Form 1098. Report deductible points on line 10	9a	15,462.	
	b	Other deductible home mortgage interest (If paid to an individual, show that person's name and address) ▶	9b		
	10	Deductible points (See Instructions for special rules)	10		
	11	Deductible investment interest (attach Form 4952 if required) (See page 28)	11		
	12a	Personal interest you paid (See page 28) ** [12a] 422.			
	b	Multiply the amount on line 12a by 10% (.10) Enter the result	12b	42.	
	13	Add the amounts on lines 9a through 11 and 12b. Enter the total ▶ 13			15,504.
Gifts to Charity (See Instructions on page 29)		**Caution** *If you made a charitable contribution and received a benefit in return, see page 29 of the Instructions*			
	14	Contributions by cash or check	14	2,860.	
	15	Other than cash or check (You **MUST** attach Form 8283 if over $500) Sch #2	15	225.	
	16	Carryover from prior year	16		
	17	Add the amounts on lines 14 through 16. Enter the total ▶ 17			3,085.
Casualty and Theft Losses	18	Casualty or theft loss(es) (attach Form 4684) (See page 29 of the Instructions) ▶ 18			
Moving Expenses	19	Moving expenses (attach Form 3903 or 3903F) (See page 30 of the Instructions) ▶ 19			
Job Expenses and Most Other Miscellaneous Deductions (See Instructions on page 30 for expenses to deduct here)	20	Unreimbursed employee expenses-job travel, union dues, job education, etc. (You **MUST** attach Form 2106 if required. See Instructions) ▶	20		
	21	Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶ See Schedule #3	21	4,902.	
	22	Add the amounts on lines 20 and 21. Enter the total	22	4,902.	
	23	Enter amount from Form 1040, line 32 [23] 88,731.			
	24	Multiply the amount on line 23 by 2% (.02) Enter the result	24	1,775.	
	25	Subtract line 24 from line 22. Enter the result. If less than zero, enter -0- ▶ 25			3,127.
Other Miscellaneous Deductions	26	Other (from list on page 30 of Instructions) List type and amount ▶ ▶ 26			
Total Itemized Deductions	27	Add the amounts on lines 4, 8, 13, 17, 18, 19, 25, and 26. Enter the total here. Then enter on Form 1040, line 34 the **LARGER** of this total or your standard deduction from page 20 of the Instructions ▶ 27			30,635.

For Paperwork Reduction Act Notice, see Form 1040 Instructions. N788 **Schedule A (Form 1040) 1990**

* See Schedule #1
** BANK OF AKRON

5

L. WILLIAM PAXON SSN: 115-46-3307 Page 1

SCHEDULE 1 - Medical and Dental Expenses

Description	Amount
Medical Insurance Premiums	277
	277

SCHEDULE 2 - Contributions Other Than Cash

Description	Amount
USED CLOTHING	225
	225

SCHEDULE 3 - Other Expenses Subject to 2% Limit

Description	Amount
Tax Return Preparation Fee	60
MEALS & LODGING WHILE IN DC	3,000
FEES AND DUES	55
TRAVEL & PROMOTION	1,203
SUBSCRIPTIONS & SUPPLIES	174
DRUG TEST PROGRAM	410
	4,902

New York State Department of Taxation and Finance

1990

Resident Income Tax Return

New York State • City of New York • City of Yonkers

IT-201

COPY

For the year Jan. 1 — Dec. 31, 1990, or fiscal tax year beginning , 1990, ending , 19

For office use only

Attach label, or print or type

Last name	First name and middle initial (If joint return, enter both names)	Your social security number
PAXON, L. WILLIAM		115-46-3307
Mailing address (number and street or rural route)	Apartment number	Spouse's social security number
251 WEDGEWOOD		
City, village or post office	State / ZIP code	NY State county of residence
WILLIAMSVILLE	NEW YORK 14221	ERIE

In the space below, print or type your permanent home address within New York State if it is not the same as your mailing address above (see instructions, page 20).

School district name: WILLIAMSVILLE

Permanent home address (number and street or rural route) — Apartment number

School district code number: 706

City, village or post office — State: NY — ZIP code

If taxpayer is deceased, enter First name and date of death

(A) Filing status — check one box:

Attach Copy 2 of wage and tax statements here

- (1) [X] Single
- (2) [ ] Married filing joint return (enter spouse's social security number above)
- (3) [ ] Married filing separate return (enter spouse's social security number above)
- (4) [ ] Head of household (with qualifying person)
- (5) [ ] Qualifying widow(er) with dependent child

(B) Did you itemize your deductions on your 1990 federal income tax return? Yes [X] No [ ]

(C) Can you be claimed as a dependent on another taxpayer's federal return? Yes [ ] No [X]

(D) If you use a paid preparer and do not want New York tax forms mailed to you next year, check box [X]

(E) Enter the number of exemptions claimed from your federal return, line 6e [1]

Enter your income items and total adjustments exactly as they appear on your federal return (see instructions page 10).

Federal Income and Adjustments

1	Wages, salaries, tips, etc.	1	87,440.
2	Taxable interest income	2	44.
3	Dividend income	3	
4	Taxable refunds of state and local income taxes (also enter on line 24 below)	4	1,247.
5	Alimony received	5	
6	Business income or (loss) (attach copy of federal Schedule C, Form 1040)	6	
7	Capital gain or (loss) (attach copy of federal Schedule D, Form 1040)	7	
8	Capital gain distributions not reported on line 7	8	
9	Other gains or (losses) (attach copy of federal Form 4797)	9	
10	Taxable amount of IRA distributions	10	
11	Taxable amount of pensions and annuities	11	
12	Rents, royalties, partnerships, estates, trusts, etc. (attach copy of federal Schedule E, Form 1040)	12	
13	Farm income or (loss) (attach copy of federal Schedule F, Form 1040)	13	
14	Unemployment compensation (insurance)	14	
15	Taxable amount of social security benefits (also enter on line 25 below)	15	
16	Other income (see instructions page 10) Identity	16	
17	Add lines 1 through 16	17	88,731.
18	Total federal adjustments to income (see instructions page 11) Identity	18	
19	**Subtract line 18 from line 17. This is your federal adjusted gross income**	19	88,731.

Attach check or money order here

New York Adjusted Gross Income

	New York Additions (see instructions page 11)				
20	Interest income on state and local bonds (but not those of New York State and local governments within the state)			20	
21	Public employee 414(h) retirement contributions (see instructions, page 11)			21	
22	Other (see instructions page 11) Identity			22	
23	Add lines 19 through 22			23	88,731.
	New York Subtractions (see instructions page 12)				
24	Taxable refunds of state and local income taxes (from line 4 above)	24	1,247.		
25	Taxable amount of social security benefits (from line 15 above)	25			
26	Interest income on U.S. government bonds	26			
27	Pension and annuity income exclusion	27			
28	Other (see instructions page 12) Identity	28			
29	Add lines 24 through 28			29	1,247.
30	**Subtract line 29 from line 23. This is your New York adjusted gross income** (If you claimed the standard deduction on your federal return, skip lines 31 through 45 and enter the line 30 amount on line 46 on page 2.)			30	87,484.

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IT-201 (1990) (Page 2) PAXON, L. WILLIAM 115-46-3307

If you itemized your deductions on federal Form 1040, fill in lines 31 through 45 and continue on line 46

Tax Computation

31	Medical and dental expenses (from federal Schedule A, line 4)	31	
32	Taxes you paid (from federal Schedule A, line 8)	32	8,919.
33	Interest you paid (from federal Schedule A, line 13)	33	15,504.
34	Gifts to charity (from federal Schedule A, line 17)	34	3,085.
35	Casualty and theft losses (from federal Schedule A, line 18)	35	
36	Moving expenses (from federal Schedule A, line 19)	36	
37	Job expenses and most other miscellaneous deductions (from federal Schedule A, line 25)	37	3,127.
38	Other miscellaneous deductions (from federal Schedule A, line 26)	38	
39	Total itemized deductions (from federal Schedule A, line 27)	39	30,635.
40	State, local and foreign income taxes included on line 32	40	5,264.
41	Subtract line 40 from line 39	41	25,371.
42	Other adjustments (see instructions, page 14)	42	
43	Line 41 and add or subtract line 42	43	25,371.
44	Itemized deduction adjustment (if line 30 is more than $100,000, see instructions, page 14; all others enter "0" on line 44)	44	0.
45	Subtract line 44 from line 43. This is your itemized deduction	45	25,371.
46	Enter the amount from line 30 on the first page (this is your New York adjusted gross income)	46	87,484.
47	Check appropriate box and enter the larger of: [ ] your standard deduction from instructions, page 15 or [X] your itemized deduction from line 45	47	25,371.
48	Subtract line 47 from line 46	48	62,113.
49	Dependent exemptions (from line c of Dependent Exemption Worksheet, instructions, page 15)	49	.00
50	Subtract line 49 from line 48. This is your taxable income	50	62,113.
51	New York State tax on line 50 amount (use New York State Tax Table on yellow pages 29 through 36)	51	4,534.

Credits/Other Taxes/Gift/Totals

52	NY State child and dependent care credit ● number of qualifying persons [ ] cared for in 1990 ● amount of federal credit for child and dependent care [ ] X 20% (.20) =	52		
53	New York State household credit (from Table I, II or III, instructions page 16)	53	0.	
54	Other New York State credits (from Form IT-201-ATT, line 7, attach form)	54		
55	Add lines 52, 53, and 54			55
56	Subtract line 55 from line 51 (if line 55 is more than line 51, enter "0")			56 4,534.
57	Other New York State taxes (from Form IT-201-ATT, line 15, attach form)			57
58	Add lines 56 and 57. This is the total of your New York State taxes			58 4,534.
59	City of New York resident tax (use City of NY Tax Table on white pages 37-44)	59		
60	City of NY household credit (from Table IV, V or VI, page 17)	60		
61	Subtract line 60 from line 59 (if line 60 is more than line 59, enter "0")	61	0.	
62	City of New York nonresident earnings tax (attach Form NYC-203)	62		
63	Other city of New York taxes (from Form IT-201-ATT, line 19, attach form)	63		
64	City of Yonkers resident income tax surcharge (from Yonkers worksheet, page 18)	64		
65	City of Yonkers nonresident earnings tax (attach Form Y-203)	65		
66	Part-year city of Yonkers resident income tax surcharge (attach Form IT-360.1)	66		
67	Add lines 61 through 66. This is the total of your city of New York and city of Yonkers taxes			67
68	If you want to Return a Gift to Wildlife, enter amount: $5, $10, $20, other (see instructions, pages 9 and 18)			68 .00
69	Add lines 58, 67 and 68. This is the total of your New York State, city of New York and city of Yonkers taxes, and Gift to Wildlife			69 4,534.

See instructions for figuring city of New York taxes and city of Yonkers taxes

Payments

70	Real property tax credit (from Form IT-214, line 17; attach form)	70	
71	Total New York State tax withheld (attach wage and tax statements to page 1)	71	5,264.
72	Total city of New York tax withheld (attach wage and tax statements to page 1)	72	
73	Total city of Yonkers tax withheld (attach wage and tax statements to page 1)	73	
74	Estimated tax paid/Amount paid with Form IT-370	74	
75	Add lines 70 through 74. This is the total of your payments		75 5,264.

● Attach Copy 2 of your wage and tax statements to page 1 of this return
● Sign your return below.

Refund/Owe

76	If line 75 is more than line 69, enter amount overpaid (also complete line 77 or 78, or both)		76 730.
77	Amount of line 76 to be refunded to you		77 730.
78	Amount of line 76 to be applied to your 1991 estimated tax	78	
79	If line 75 is less than line 69, enter amount you owe (do not send cash, make check or money order payable to "NY State Income Tax"; write your social security number and "1990 income tax" on it)		79
80	Estimated tax penalty (see instructions, page 19)	80	

Mail your completed return to: NYS Income Tax, W.A. Harriman Campus, Albany, NY 12227-0125

Paid Preparer's Use Only				Sign Your Return		
Preparer's signature	Date 04/09/91	Check if self-employed [ ]		Your signature		Date
Firm's name (or yours, if self-employed) and address		Preparer's S.S. number 108-34-5209		Spouse's signature (if joint return)		Date
CAMPBELL, BOLAS & ASSOCIATES 10535 MAIN STREET PO BOX Y CLARENCE, NEW YORK 14031		E.I. number 16-1047035				

COPY

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 16 AM 11: 30

Donald Milford Payne
(Full Name)

14 Bock Avenue
(Mailing Address)

Newark, New Jersey 07112

Filer Status	[x] Member of the U.S. House of Representatives	State: New Jersey District: 10	[ ] Officer or Employee — Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MAY 15 1991

Me

(Office Use Only)

6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Schering-Plough (Jan. 15, 1990)	Speech	$1,000.00	X
	Job Grand Lodge International (Feb. 18, 1990)	Speech	300.00	
	St. John's Baptist Church (March 22, 1990)	Speech	300.00	
	Bethune DuBois Fund (May 8, 1990)	Speech	300.00	
	The Connell Company (May 11, 1990)	Speech	2,000.00	
	Region II National Medical Assn. (June 21, 1990)	Speech	1,030.00	
	Bellcore (Nov. 21, 1990)	Speech	2,000.00	
	St. John's University (Nov. 28, 1990)	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name
Donald M. Payne

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Conrail Stock			X							X								X								
	First Fidelity Bancorp Stock		X								X								X								X
	UTS Electronic Control Stock (value dropped below threshold)	X																									
	Laser Master International Stock (value dropped below threshold)	X																									
	Copeland Companies Pension Plan			X																							
	Shearson Lehman Bros. IRA				X																						

For additional assets and unearned income, use next page

Reporting Individual's Name
Donald M. Payne

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	First Fidelity Bancorp Stock	X			12-13-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name
Donald M. Payne

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
New El Salvador Today (NEST)	Feb.10-14, 1990	Roundtrip Air from Newark, NJ to San Salvador, 4 days food & lodging, self & brother, fact-finding	
Aspen Institute	Apr. 11-16, 1990	Roundtrip Air from Newark, NJ to Bermuda, 5 days food & lodging, self & brother, conference	
New York State Governor's Office for Voluntary Service	Apr. 27, 1990	Roundtrip Air from Newark, NJ to Albany, NY -- speech	
Industry Trade Council of Taiwan	Aug. 6-15, 1990	Roundtrip Air from Newark, NJ to Taipei, Taiwan, 5 days food & lodging, self & brother -- fact-finding	
		(Aug. 11-15, Foreign Affairs Committee travel to Singapore, self -- brother return to NJ on Aug. 11)	

[see continuation sheet]

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C 7342)

Reporting Individual's Name: Donald M. Payne

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board of Directors	U.S. Committee for UNICEF
Board of Directors	Newark Boys' and Girls' Clubs
Board of Directors	UNA-USA New Jersey Chapter

[see continuation sheet]

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to. future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA ☒

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Donald M. Payne	May 15, 1991

GPO 1991 37-598 (m)

Donald M. Payne

PART VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

National Black Caucus of State Legislators	Nov. 25-28, 1990	Air transportation New Orleans to St. Thomas to Newark, NJ 3 days food & lodging, self, conference

PART VIII -- Positions

Board of Directors	Newark Day Center
Board of Directors	Newark YMWCA
Board of Directors	Congressional Award Foundation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 5:43

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only) 7

LEWIS F. PAYNE, JR.
(Full Name)

19 SAWMILL CREEK ROAD
(Mailing Address)

WINTERGREEN, VIRGINIA 22958

Filer Status	[X] Member of the U.S. House of Representatives — State: VIRGINIA District: 5TH	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	PAYNE, ROSS & ASSOCIATES ADVERTISING, INC.	SPOUSE SALARY	N/A	

For additional earned income, use next page

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Reporting Individual's Name

LEWIS F. PAYNE, JR.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	CENTRAL FIDELITY BANK ACCOUNTS					X							X								X						
	FIDELITY INVESTMENTS PORTFOLIO - BONDS			X							X									X							
	APEX NUMICIPAL FUND - BONDS		X										X						X								
	VIRGINIA STATE TRANS. FUND - BONDS			X									X								X						
	L.F. PAYNE FOR CONGRESS CAMPAIGN COMM. LOAN					X											NONE	X									
	ALEX BROWN - BOND			X									X								X						

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: LEWIS F. PAYNE, JR.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	WINTERGREEN HOMESITE 174 CHESTNUT SPRINGS - LOT			X																						
	WINTERGREEN - DEVILS KNOB - LAND				X								X									X			X	
	HOUSE - 1941 BOHICKET BOHICKET MARINA, SC - RENTAL PROP.					X						X									X					
	CONDO - RENTAL PROP. 12 - 3RD STREET., NE WASHINGTON DC					X						X									X					
	EQUIPMENT RENTAL CIS EQUIPMENT TRUST SAN MATEO, CA			X								X										X				
	ONE CITY PLACE LTD. PARTNERSHIP .17% OWNERSHIP OWNING ONE CITY PLACE - OFFICE BUILDING - REAL ESTATE				X											DISTRIBUTION LOSS	X									
	GREAT PLAINS PARTNERSHIP 1.6% OWNERSHIP OWNING OFFICE BUILDING - REAL ESTATE					X							X			DISTRIBUTION LOSS	X									
	206 E. JEFFERSON STREET 50% OWNERSHIP OWNING OFFICE BUILDING - REAL ESTATE			X												DISTRIBUTION LOSS	X									
	CHESAPEAKE TRADING PARTNERSHIP 24% OWNERSHIP BUSINESS AND SALES OWNING OFFICE EQUIPMENT	X											X			DISTRIBUTION LOSS	X									
	MLLEE ACQUISITION FUND -004103 LTD. PTR. OWNING BONS & NOTES			X							X		X	X					X							
	GRAND BANK PARTNERSHIP - 12% OWNERSHIP PRODUCING GAN & OIL	X											X			DISTRIBUTION LOSS	X									
	WINTERGREEN DEVELOPMENT INC. 35.5% OWNERSHIP SELLING REAL ESTATE AT WINTERGREEN								X				X			DISTRIBUTION					X					
	BEAR SCRATCH PARTNERS 50% OWNERSHIP OWNING REAL ESTATE IN NELSON CO., VA	X														DISTRIBUTION LOSS	X									
	WINTERGREEN INVESTORS PTR. 14.29% ONWERSHIP SELLING REAL ESTATE	X											X			DISTRIBUTION					X					
JT	CRESTAR BANK - IRA			X																						
	L.F. PAYNE RETIREMENT TRUST R.M. HUFF, TRUSTEE						X									Retirement Distribution					X					

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Reporting Individual's Name

LEWIS F. PAYNE, JR.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	WINTERGREEN - DEVILS KNOB - LAND		X		6-30-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	CRESTAR BANK, CHARLOTTESVILLE, VA	LINE OF CREDIT		X					
	CENTRAL FIDELITY BANK, CHARLOTTESVILLE, VA	LINE OF CREDIT			X				
	CENTRAL FIDELITY BANK, CHARLOTTESVILLE, VA	MORTAGE ON DC CONDO- 12-3RD ST. NE. WASHINGTON, DC				X			

Reporting Individual's Name
LEWIS F. PAYNE, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
German Marshall Fund of U.S.	May 26, 1990 to Jun. 4, 1990	Roundtrip Air Travel with wife from Washington to Bonn, Germany, Berlin, Prague, Budapest, Frankfort with meals & lodging to meet with members of*	
National Society of Professional Engineers	July 16, 1990	Air fare from Charlottesville, VA to Norfolk, VA to Washington, DC, one meal, for address to Society	
Democratic Leadership Council	Mar. 22, 1990	Air Fare to DLC Convention in New Orleans, meal with wife	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

* Parliments of Germany, Hungary and Czechoslovakia

Reporting Individual's Name

LEWIS F. PAYNE, JR.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee partner proprietor representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
SEE	
ATTACHED	
PAGE	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Lewis F. Payne Jr	May 15, 1991

GPO 1991 37-598 (m)

POSITIONS:

MEMBER, BOARD OF DIRECTORS	NATURE CONSERVANCY - ST. OF VA
LIMITED PARTNER	GREAT PLAINS PARTNERSHIP
LIMITED PARTNER	CHESAPEAKE TRADING CO., LTD.
GENERAL PARTNER	206 EAST JEFFERSON STREET
LIMITED PARTNER	ML - LEE ACQUISITION FUND
LIMITED PARTNER	GRAND BANKS, LTD.
GENERAL PARTNER	BEAR SCRATCH PARTNERS
GENERAL PARTNER	WINTERGREEN INVESTORS PARTNERSHIP
LIMITED PARTNER	ONE CITY PLACE, LTD.
MEMBER, BOARD OF DIRECTORS	NELSON COUNTY COMMUNITY DEVELOPMENT FOUNDATION
MEMBER, BOARD OF DIRECTORS	UVA REAL ESTATE FOUNDATION
MEMBER, BOARD OF DIRECTORS	AVERETT COLLEGE
MEMBER, BOARD OF DIRECTORS	WINTERGREEN DEVELOPMENT, INC.
MEMBER, BOARD OF DIRECTORS	PATRICK HENRY BOYS HOME

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 [illegible] 15 [illegible] 4:55

HAND DELIVERED

MC (Office Use Only)

6

Don J. Pease
(Full Name)

143 E. College St. Apt. 409
(Mailing Address)

Oberlin, Ohio 44074

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio, District: 13	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American-Arab Anti-Discrimination Comm. (3-22-90)	Honorarium	$1500	X
	American Advertising Federation (4-12-90)	"	$2000	
	Ohio Chamber of Commerce (5-8-90)	"	$500	
	Chicago Board of Trade (8-28-90)	"	$750	
	Chicago Mercantile Exchange (8-28-90)	"	$750	X
	Pfizer Inc. (12-12-90)	"	$2000	
	New York Times (5-8-90)	writing fee	$150	
	New York Times (10-20-90)	" "	$150	
	Christian Science Monitor (4-4-90)	" "	$100	

For additional earned income, use next page

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Reporting Individual's Name
Don J. Pease

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income																**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Lorain National Bank Agency Account		X								X		X						X								
	Wright Money Market Fund																										
	~~Federated Short Term U.S. Gov't~~ Securities Money Market Fund																										
	U.S. Treasury Note																										
	Dublin, Ohio School Bonds																										
	Federated Growth Trust																										
	Daily Interest Fund																										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Don J. Pease

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	First Variable Rate Fund		X										X						X								
JT	Wright Patman Credit Union				X								X								X						
JT	Fidelity Ohio Tax-free Fund		X										X						X								
	Washington Federal Savings Bank		X										X						X								
JT	Lorain County Bank	X											X					X									

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Reporting Individual's Name
Don J. Pease

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name

Don J. Pease

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Mercantile Exchange		Aug. 27-28 1990	Roundtrip train travel from Elyria, Ohio to Chicago, food and ~~lodging for member and spouse in connection with speech~~	
Pfizer, Inc.		Nov. 15-16 1990	Transportation, hotel (night of Nov.15) and meals for member ~~and spouse in connection with speech at Hoffman~~	
			Estates Ill. on Nov. 16, 1990	
Amtrak		Nov. 9-15 1990	For a factfinding trip via train, including transportation, food ~~and lodging for member and spouse, from Chicago, Ill. to Oakland,~~	
			Calif. and return from Nov. 9 to Nov. 15, 1990. Accepted expenses for only four days of travel (from Chicago to Oakland and back to Omaha.)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Don J. Pease

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Member, Board of Directors	International Labor Rights Education and Research Fund

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91

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U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Nancy Pelosi
(Full Name)

2640 Broadway
(Mailing Address)

San Francisco, CA 94115

Filer Status	[X] Member of the U.S. House of Representatives	State: California District: Fifth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

mc (Office Use Only) 14

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

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Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
The Brookings Institution (April 11, 1990)	Honoraria	$400	X
Great Western Bank (April 16, 1990)	Honoraria	$2,000	X
Spouse:			
Financial Leasing Services	Salary	N/A	
Carey Associates	Management Fee	N/A	
Dancoor, Inc.	Commission	N/A	
San Ysidro Management Co.	Management Fee	N/A	
Solar Micro Utility P	Management Fee	N/A	

For additional earned income, use next page

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Adit Partners San Francisco, CA Public common stock fund					X							X	X						X							
S	Advatex Assoc. Public common stock		X											X						X							X
S	Ashlar, Inc. Sunnyvale, CA Common stock			X																							X
S	Auberge du Soleil, Ltd. Owns and operates hotel resort Rutherford, CA						X					X	X									X					
S	Bank of America San Francisco, CA Savings account		X										X						X								
S	Bedford Hotel Associates Owns hotel. San Francisco, CA				X							X	X						X								
JT	B. F. Enterprises Public common stock				X																						

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Nancy Pelosi

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Borel Estate Company Owns shopping center San Mateo, CA					X						X	X									X					
S	Carey Associates L.P. Limousine business San Francisco, CA							X			X		X											X			
S	Carey International Washington, DC Common and Preferred stock					X																					
S	Castelle, Inc. Santa Clara, CA Common stock			X																							X
S	Chalone, Inc. Public common stock			X																							
S	Chandler Insurance Public common stock		X											X							X						X
S	Charlottetown Associates L.P. Owns office building Baxter Street, Charlotte, NC			X																							

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Citicorp Public common stock		X								X			X						X							X
S	Container Programs, Inc. Equipment leasing company San Francisco, CA							X																			
S	Convest Energy Corp. Public common stock	X																									
S	Electro Rent Corp. Public common stock				X									X										X			X
S	Entertainment Express, Ltd. Operates cable television service So. San Francisco, CA					X																					
S	Financial Leasing Services, Inc. Leasing and investment company San Francisco, CA							X																			
S	Forty five Belden Corp. General Partner of Carey Associates L.P. San Francisco, CA						X				X												X				

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Forum Systems, Inc. San Jose, CA ... common stock			X																						
S	GATX Public common stock			X							X									X						
JT	Genway Corporation Chicago, IL Common stock, grantor trust			X							X											X				
JT	Hayward Exchange Hayward, CA Interest income on escrow deposit								X				X									X				
S	Juliana Hotel Associates Owns hotel. San Francisco, CA				X							X	X									X				
S	Kimmin Svc. Corp. Public common stock		X																							
S	Marine Transport Lines Inc. Public common stock			X										X						X						X
S	Martech USA Public common stock			X																						X

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Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Mass. Microsystems Inc. Public common stock			X										X								X					X
S	McGrath RentCorp Public common stock							X			X											X					
S	Miller Bldg. System Public common stock		X								X			X				X									X
S	Nautilus Leasing Services Container leasing company San Francisco, CA				X																						
S	Nine Hundred One Battery, Ltd. Owns office building San Francisco, CA			X								X								X							
S	PIA-A Avenel Real Estate development Potomac, MD							X					X	X										X			
S	Potomac Investment Assoc. Real Estate development company Gaithersburg, MD								X				X	X											X		
S	Piatti Restaurant Co. L.P. Tiburon, CA				X																						X

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Presidio Partners Owns single family homes Phoenix, AZ	X												X				X								X
S	Qume Corp. Public common stock			X																						
S	Read-Rite Corp. Milpitas, CA Common stock			X																						
JT	Robert Half Int. Public common stock					X																				
S	Wm. Rollnick & Co. (AKA Genstar Rental Electronics) Equipment leasing company Palo Alto, CA					X					X		X								X					X
S	San Francisco Hotel Assoc. Owns Vintage Court Hotel San Francisco, CA				X																					
S	Sanifill Inc. Public common stock				X									X								X				X

3083

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	San Ysidro Ranch L.P. Owns resort hotel Montecito,CA					X						X	X										X				
S	San Ysidro Ranch Management Co. Manages resort hotel Montecito, CA						X					X	X										X				
S	Satellite Info. Systems Public common stock		X																								
S	Solar Micro Utility P Owns solar panels for domestic water heating Los Angeles, CA				X																						
S	Strober Org. Inc. Public common stock		X											X						X							X
S	Sutter Hotel Associates Owns Galleria Park Hotel San Francisco, CA				X							X	X								X						
S	Tellabs, Inc. Public common stock		X																								
S	Teradyne Corp. (AKA Zehtel Inc.) Public convertible debentures			X									X							X							

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	TICOR Title Insurance Interest income on escrow deposit San Francisco, CA								X				X						X							
S	Union Bank San Francisco, CA Savings account		X										X							X						
JT	Wells Fargo Bank San Francisco, CA Savings account		X										X						X							
JT	4 Alpine Place Alpine Meadows, CA Condominium apartment					X						X										X				
S	45 Belden Place San Francisco, CA Four story commercial building								X			X												X		
S	208 Farragut, Sea Colony Bethany Beach, DE Condominium apartment					X						X											X			
JT	40 Presidio Terrace San Francisco, CA Single family residence								X			X												X		X

Reporting Individual's Name
Nancy Pelosi

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	3239 Webster Street San Francisco, CA Single family residence							X				X											X				
JT	Skellenger Lane Napa, CA 8 acre vineyard							X																			X
JT	Zinfandel Lane St. Helena, CA 18 acre vineyard and rental property								X																		X

Financial Disclosure A-2(a)

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Nancy Pelosi

Part IV Transacations

Holder	Identification of Assets	Type	Date	Amount
S	Advantex - common stock	Sale	12/19/90	B
S	Ashlar - common stock	Purchase	5/8/90	C
S	Castelle - common stock	Purchase	10/29/90	C
S	Chandler Ins. - common stock	Sale	10/23/90	B
S	Citicorp - common stock	Sale	9/19/90	B
S	Electro Rent - common stock	Sale	4/26/90	D
S	Marine Trans. Lines - common stock	Sale	1/15/90	C
S	Martech USA - common stock	Purchase	7/16/90 & 9/20/90	D
S	Mass. Microsystems - common stock	Sale	4/3/90	B
S	Mass. Microsystems - common stock	Purchase	5/11/90 & 7/26/90	D
S	Miller Bldg. Systems - common stock	Sale	12/19/90	B
S	Piatti Rest. Corp. L.P.	Formation	7/1/90	D
S	Presidio Partners - Phoenix, AZ	Sale	12/31/90	B
S	Wm. Rollnick & Co. - common stock	Purchase	10/17/90	C
S	Sanifill - common stock	Purchase	5/11/90	D
S	Sanifill - common stock	Sale	7/20/90	D
S	Strober Org. Inc. - common stock	Sale	12/19/90	B
JT	40 Presidio Terrace	Exchange	5/25/90	H
JT	Skellenger Lane, Napa, CA	Purchase	9/13/90	F
JT	Zinfandel Lane, St. Helena, CA	Purchase	11/20/90	H

Nancy Pelosi

Part V Liabilities

Holder	Creditor	Type of Liability		Category
JT	Bank of America, San Francisco, CA	Mortgage	4 Alpine Place Alpine Meadows, CA	D
S	Home Savings, Los Angeles, CA	Mortgage	3239 Webster Street San Francisco, CA	F
JT	Home Savings, Los Angeles, CA	Mortgage	40 Presidio Terrace San Francisco, CA	G
S	Loyola Federal Savings, Baltimore, MD	Mortgage	208 Farragut Bethany Beach, MD	C
S	St. Paul Federal Savings, Chicago, IL	Mortgage	45 Belden Place San Francisco, CA	H
S	Teachers Insurance, New York	Mortgage	45 Belden Place San Francisco, CA	H
JT	Union Bank, San Francisco, CA	Mortgage	Zinfandel Lane St. Helena, CA	H
S	American Security Bank, Washington, DC	Line of Credit		E
S	Redwood Bank, San Francisco, CA	Demand Note		C
S	Union Bank, San Francisco, CA	Line of Credit		H
S	Hambrecht & Quist, San Francisco, CA	Margin Account		D
S	Portsmouth Securities, San Francisco, CA	Margin Account		D

Reporting Individual's Name
Nancy Pelosi

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Human Rights Campaign Fund	July 13, 1990	Air Travel from Wash DC to Chicago to SF , lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
Nancy Pelosi

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Member of Board	Organizing Institute Resigned 1990
Board of Governors	World Centre

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Nancy Pelosi	May, 15, 1991

GPO: 1991 37-598 (m)

3090

RECEIVED
1991 MAY 29 AM 11:08
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 24 1991

Nancy Pelosi
U.S. Representative
Washington, D.C. 20515

May 22, 1991

Donald K. Anderson
Clerk of the House
U.S. House of Representatives
1036 Longworth HOB
Washington, D.C. 20515

✓ MC (1)

Dear Mr. Anderson:

Please note that on my Financial Disclosure Statement dated May 15, 1991, I inadvertently neglected to mark Block C noting the income my spouse made during 1990 on the following investment:

Parts II and III, page 6 of 9;

Asset	Type	Category
San Francisco Hotel Associates	Rent	V

For the record allow me to note that several other assets listed in Parts II and III of the statement did not generate any income during 1990, and therefore per the instructions Block C for income was left blank.

Sincerely,

Nancy Pelosi

NANCY PELOSI
Member of Congress

NP:sh

Not Printed at Government Expense

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 PM 12:46
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 5

3092

TIMOTHY J. PENNY
(Full Name)

436 CANNON HOUSE OFFICE BLDG
(Mailing Address)

WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives — State MN District 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	NATIONAL ASSN WHOLESALE GROCERS OF AMERICA WASHINGTON, D.C. (3/19/90)	SPEECH	$1,000	X
	SPOUSE - IN HOME CHILD CARE	FEES	NA	

For additional earned income, use next page

Reporting Individual's Name
TIMOTHY J. PENNY

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																		Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
JT	215 BIRCH, NEW RICHLAND, MN					X								X								X							
JT	WRIGHT-PATMAN FEDERAL CREDIT UNION				X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name

TIMOTHY J. PENNY

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
JT	ESTATE OF JOE STADULSKI	MORTGAGE ON 215 BIRCH, NEW RICHLAND, MN		X					

Reporting Individual's Name
TIMOTHY J. PENNY

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4 limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
NATIONAL FEED + GRAIN ASSN	12/4/89	ROUNDTRIP AIR FROM WASH. DC TO INDIANAPOLIS (REIMBURSEMENT REC'D 1/15/90) - SPEECH	
WISCONSIN FARM BUREAU	2/23/90	ROUNDTRIP AIR FROM WASH. DC TO MADISON - SPEECH	
ANTI-DEFAMATION LEAGUE OF B'NAI B'RITH	1/7-1/12/90	ROUNDTRIP AIR WASH. DC - TEL AVIV, 5 DAYS FOOD + LODGING - FACT FINDING MISSION	
DEMOCRATIC LEADERSHIP COUNCIL	3/22-3/23/90	AIR TRAVEL WASH. DC TO NEW ORLEANS, ONE DAY'S FOOD, - ATTEND CONFERENCE	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
TIMOTHY J. PENNY

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
ACTING CHAIRMAN	AMERICANS FOR GENERATIONAL EQUITY
DIRECTOR	GAINEY CENTER, OWATONNA, MN

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL
X Timothy J. Penny

DATE (Month, Day, Year)
May 16 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:01

U.S. ... WASH. ...

HAND DELIVERED

MC (Office Use Only) 7

Carl Christopher Perkins
(Full Name)

1004 Longworth Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S House of Representatives	State KY District 7th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Chicago Board of Trade (3/26/90)	Speech	$ 750.00	
	Chicago Mercantile Exchange (3/26/90)	Speech	750.00	
	Phillip Morris Management Corp. (3/27/90)	Speech	1,000.00	
	Northeastern University (4/23/90)	Speech	500.00	
	Nat'l. Assn. of Trade & Technical Schools (5/12/90)	Speech	2,000.00	
	American Trucking Association (5/22/90)	Speech	1,000.00	
	Hecht, Spencer and Associates (7/25/90)	Speech	1,000.00	
	District 2 MEBA-AMO (9/17/90)	Speech	2,000.00	
	Distilled Spirits Council (9/18/90)	Speech	2,000.00	
	National Coal Association (9/28/90)	Speech	500.00	

For additional earned income, use next page

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Reporting Individual's Name

Carl C. Perkins

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Waste Management, Inc. (9/28/90)	Speech	$2,000.00	
Philip Morris Management Corp. (10/1/90)	Speech	1,000.00	
Smokeless Tobacco Council (10/25/90)	Speech	1,000.00	
National Beer Institute (12/4/90)	Speech	1,000.00	
Tobacco Institute (12/5/90)	Speech	2,000.00	
Outdoor Advertising (12/18/90)	Speech	1,000.00	

Reporting Individual's Name
Carl Christopher Perkins

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Bank of Hindman Stock						X				X									X							
	Liquidation of all horses	None received																					X				
	Liquidation of all cattle	None received																						X			
	Liquidation of all tobacco	None received																					X				
	Hanover Townhouse, Lexington					X																					
	1/3 und. interest 15 acres Dyer Branch, Knott Co., KY		X																								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Carl Christopher Perkins

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	1/2 interest 88 acres, Leburn Knott Co., Kentucky			X																							
	1/2 undivided interest 35 acres Dick Hall Branch, Knott Co., KY		X																								
	Estate of Jim Perkins Trust		X																								
	Fidelity Investments		X																								
	Carlyle Real Estate		X																								
	Commerce National Bank (IRA-- Closed 9/7/90)	X											X								X						

Reporting Individual's Name

Carl Christopher Perkins

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	269 Acres, Georgetown, Kentucky		X		6/23/90					X		
	63.82 Acres, Georgetown, Kentucky		X		10/30/90			X				
	143.26 Acres, Ammerman Lane, Georgetown, Kentucky		X		10/30/90				X			
	30 Acres, Hollybush, Kentucky (owned 1/2 interest)		X		5/25/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Bank of Hindman	Business		X					
	Commercial Bank	Business		X					
	Liberty National Bank	Personal & Business		X					
	People's Bank & Trust	Business		X					
	Citizens Deposit Bank	Business		X					
	1st Guaranty Bank	Business		X					

Reporting Individual's Name
Carl Christopher Perkins

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Mercantile Exchange	3/25-26	Roundtrip air travel from Lexington, KY to Chicago	
Nat'l. Association of Trade & Technical Schools	5/11-12	Roundtrip air travel from St. Louis, MO to Washington	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name

Carl Christopher Perkins

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year)

May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(Office Use Only)

Carl Christopher Perkins
(Full Name)

1004 Longworth Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives — State KY District 7th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
Chicago Board of Trade (3/26/90)	Speech	$ 750.00	
Chicago Mercantile Exchange (3/26/90)	Speech	750.00	
Phillip Morris Management Corp. (3/27/90)	Speech	1,000.00	
Northeastern University (4/23/90)	Speech	500.00	
Nat'l. Assn. of Trade & Technical Schools (5/12/90)	Speech	2,000.00	
American Trucking Association (5/22/90)	Speech	1,000.00	
Hecht, Spencer and Associates (7/25/90)	Speech	1,000.00	
District 2 MEBA-AMO (9/17/90)	Speech	2,000.00	
Distilled Spirits Council (9/18/90)	Speech	2,000.00	
National Coal Association (9/28/90)	Speech	500.00	

For additional earned income, use next page

Carl C. Perkins

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Waste Management, Inc. (9/28/90)	Speech	$2,000.00	
Philip Morris Management Corp. (10/1/90)	Speech	1,000.00	
Smokeless Tobacco Council (10/25/90)	Speech	1,000.00	
National Beer Institute (12/4/90)	Speech	1,000.00	
Tobacco Institute (12/5/90)	Speech	2,000.00	
Outdoor Advertising (12/18/90)	Speech	1,000.00	

Reporting Individual's Name
Carl Christopher Perkins

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
			Bank of Hindman Stock						X				X									X							
			Liquidation of all horses	None Retained																					X				
			Liquidation of all cattle					SEE	PART	IV																X			
			Liquidation of all tobacco																						X				
			Hanover Townhouse, Lexington					X					NONE																
			1/3 und. interest 15 acres Dyer Branch, Knott Co., KY		X																								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Carl Christopher Perkins

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
1/2 interest 88 acres, Leburn Knott Co., Kentucky				X																						
1/2 undivided interest 35 acres Dick Hall Branch, Knott Co., KY			X																							
Estate of Jim Perkins Trust			X								UNKNOWN										X					
Fidelity Investments			X										X	X				X								
Carlyle Real Estate			X														Partnership Dist.	X								
Commerce National Bank (IRA-- Closed 9/7/90)		X											X								X					

Reporting Individual's Name: Carl Christopher Perkins

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	269 Acres, Georgetown, Kentucky		X		6/23/90					X		
	63.82 Acres, Georgetown, Kentucky		X		10/30/90			X				
	143.26 Acres, Ammerman Lane, Georgetown, Kentucky		X		10/30/90				X			
	30 Acres, Hollybush, Kentucky (owned 1/2 interest)		X		5/25/90	X						
	Liquidation of all horses		X		9/90-11/90		X					
	Liquidation of all tobacco		X		1/90-2/90		X					
	Liquidation of all cattle		X		1/90-4/90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Bank of Hindman	Business		X					
	Commercial Bank	Business		X					
	Liberty National Bank	Personal & Business		X					
	People's Bank & Trust	Business		X					
	Citizens Deposit Bank	Business		X					
	1st Guaranty Bank	Business		X					

Reporting Individual's Name
Carl Christopher Perkins

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Mercantile Exchange		3/25-26	Roundtrip air travel from Lexington, KY to Chicago	
Nat'l. Association of Trade & Technical Schools		5/11-12	Roundtrip air travel from St. Louis, MO to Washington	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Carl Christopher Perkins

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 15 PM 12 49

U.S.

HAND DELIVERED

Collin C Peterson
(Full Name)

Rte 2, Box 287
(Mailing Address)

Detroit Lakes, MN 56501

Filer Status	[X] Member of the U.S House of Representatives	State Minnesota District 7	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Bekkevus Peterson & Co, Ltd Detroit Lakes, MN	Salary	40,028	
	Western States Water & Power, Sept, 1991	Honoraria	1,000	
	Schedule C - Gross Income - Various Dance Jobs	Musician	1,600	
	Schedule C - Gross Income - Zephyr Estates, Hubbard, MN Real Estate Mgmt	Real Estate Mgmt Fee	1,250	
	Third Street Apartments - Sales Commission Bowman, ND	Sales Commission	1,000	

For additional earned income, use next page

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Reporting Individual's Name
Collin C Peterson

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X								X								X
	George Wash. Credit Union Accounts				X									X								X						
	182 Main Street, Dover, Delaware					X							X								X							
	Lakewest Properties, Detroit Lakes, MN Commercial Bldg - 928 Lake Ave, DL					X							X	X	X								X					
	Peterson Box, Inc (Formerly PF Enterprises), Detroit Lakes, MN				X							X							X									Created 12-29-90 Asset Transfer - PF Ent
	Kapalua, Inc, Detroit Lake, MN		X									X											X					12-29-90 Sold on Contract
	Installment Contract, Kapalua, Inc			X										X	X				X									Created by sale of Stock 12-29-90
	Third St Apts, Ltd Partnership, Bemidji, MN		X																X									Purchased 12-29-90
	Bakkerus, Peterson & Co, Ltd, Detroit Lakes, MN		X									X		X	X				X									Stock sold 12-29-90 Contract Cancelled

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Collin C Peterson

BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	BLOCK B Valuation of Asset: Category of Value (X) A: none (or less than $1,001)	B: $1,001 - $15,000	C: $15,001 - $50,000	D: $50,001 - $100,000	E: $100,001 - $250,000	F: $250,001 - $500,000	G: $500,001 - $1,000,000	H: over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I: none (or less than $201)	II: $201 - $1,000	III: $1,001 - $2,500	IV: $2,501 - $5,000	V: $5,001 - $15,000	VI: $15,001 - $50,000	VII: $50,001 - $100,000	VIII: $100,001 - $1,000,000	IX: over $1,000,000	BLOCK D Transaction (X)
Installment Contract - Bekkhans Schott & Co, Ltd Detroit Lakes, MN					X								X	X				X									Created on sale of Bekkhans Peterson
Zephyr Estates, Audubon, MN		X										X						X									Sold - 12-29-90
Installment Contract - Zephyr Estates Partners Audubon, MN			X										X	X					X								Created on above sale
Apartment Bldg - 804 - E Central, Detroit Lakes, MN		X										X											X				Transferred to Lakeland Estates, Inc
Lakeland Estates, Inc, Detroit Lakes, MN				X							X							X									

Reporting Individual's Name: Collin C Peterson

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Bekkerus Peterson & Co., Ltd - Common Stock		X		12-29-90			X				
	Kapalua, Inc Detroit Lakes, MN - Common Stock		X		12-29-90	X						
	12-Plex Apartment Bldg - 804-E Central Detroit Lakes, MN - Purchased 5-1-90 Transferred to Lakeland Estates, Inc - 12-31-90	X		X	5-1-90 12-31-90				X			
	Zephyr Estates, Audubon, MN PF Enterprises, Partnership - (Change of Form) to Peterson, Fox, Inc Detroit Lakes, MN		X	X	12-29-90 12-29-90	X	X					
	Third St Apartments, Ltd Partnership, Fargo, NoDak	X			12-29-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	1st Security State Bank, Detroit Lakes, MN	my 1/2 share of mortgage on Apartment Bldg now owned by Peterson Fox, Inc			X				
	1st American Bank, Detroit Lakes, MN	Personal Signature Loans		X					
	Don Henderson, et al, Minneapolis, MN	mortgage on apt Bldg at 804-E Central Now owned by Lakeland Estates, Inc				X			

Reporting Individual's Name: Collin C Peterson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Not Applicable		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Not Applicable				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Collin C Peterson

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	in all Corporations Listed in Part II + III
Partner	in all Partnerships Listed in Part II + III

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To Buyouts with Continuing Payments	Terms of Agreement
12-27-90	Self + Bekkeros Schott + Co, Ltd, Detroit Lakes, MN	Payments for Former business - Payable over 6 years
12-27-90	Self + Kapalua, Inc, Detroit Lakes, MN	Payment for Former business - Payable 4-1-1991
12-27-90	Self + Partners of Zephyr Estates, Audubon, MN	Payment for my Partnership Share - Payments over 2 years

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Collin C Peterson	5-15-1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 JUN 12 PM 1:08

Douglas Brian " Pete" Peterson
(Full Name)

P.O. Box 974, Marianna, Florida 32446
(Mailing Address)

HAND DELIVERED

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MC

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State: Florida, District: Second	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of Florida	Salary	22,937	
	CRT Computers, Inc.	Salary	4,000	
	1840 House, Ltd.	Spouse Salary	N/A	

Reporting Individual's Name

Douglas Brian "Pete" Peterson

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S DC	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	162 Main Street, Dover, Delaware				X							X								X							
JT	P & N Enterprise (Partnership					X						X										X					
JT	Car - Jun (Partnership)				X							X										X					
JT	CRT Computers, Inc. (Stock)					X					X							X									
JT	CRT Software, Inc. (Stock)			X							X							X									
JT	Carribean Cattle Co. (Stock)			X							X							X									
JT	Neal Enterprises, Inc. (Stock)			X							X							X									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Douglas Brian "Pete" Peterson

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income											BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Gadsden Nat'l Bank, Quincy, Fl Accounts		X										X						X								
JT	Pentagon Fed Credit Union Accounts		X										X						X								
JT	Citizens Bank, Marianna, Fl Accounts		X										X						X								
	*Department of the Air Force									N/A							Retirement						X				
	*Veterans Administration									N/A							Retirement										
JT	Pete Peterson Campaign Fund		X														Loan										
	*Not required to be disclosed																										

Reporting Individual's Name

Douglas Brian "Pete" Peterson

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X) Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X) B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 152 Main St. Dover, Del.				X			
JT	Citizens State Bank of Marianna, Florida	Mortgages on rental property:				X			
		217 West Lafayette Street Marianna, Florida							
		Apts 3 & 6 - Coronado Apts. Port St. Joe Beach, Florida							

Reporting Individual's Name

Douglas Brian "Pete" Peterson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next sections), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 16.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE [X]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

Reporting Individual's Name
Douglas Brian "Pete" Peterson

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Faculty/Administrator	Florida State University, Tallahassee, Florida
Secretary	Tri-County Airport Authority, Bonifay, Florida
Vice President	CRT Computers, Inc., Marianna, Florida
President	CRT Software, Inc., Marianna, Florida
Director	Jackson County Chamber of Commerce, Marianna, Florida

PART IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Douglas B. Peterson	June 12, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY -3 PM 12: 47
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 6

THOMAS E. PETRI
(Full Name)

303810 DENEVU LANE
(Mailing Address)

FOND DU LAC WISC. 54935

Filer Status	✓ Member of the U.S. House of Representatives — State: WISCONSIN District: 6	☐ Officer or Employee	Employing Office:
Report Type	✓ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	RECORDING INDUSTRY ASSOC. OF AMERICA	SPOUSE SALARY	N.A.	
	NATIONAL ENDOWMENT FOR THE HUMANITIES	SPOUSE SALARY	N.A.	
	KIEL AREA SCHOOL DISTRICT, KIEL WISC (5/29/90)	SPEECH	$100	X
	AM HOME SEWING ASSOC. (5/7/90)	SPEECH	$250	X
	BROOKINGS INSTITUTION (5/11/90)	SPEECH	$400	X
	BURSON-MARSTELLER (5/2/90)	ARTICLE	$500	X
	OCEAN SPRAY CRANBERRIES (4/24/90)	SPEECH	$2,000	X
	AMERICAN TRUCKING ASSOCIATIONS (4/19/90)	SPEECH	$1,000	X
	ASSOC. OF AMERICAN RAILROADS (6/7/90)	SPEECH	$500	X
	ASSOC. OF AMERICAN RAILROADS (11/15/90)	SPEECH	$1,000	X

For additional earned income, use next page

3123

Reporting Individual's Name

T.E. PETRI

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	WISCONSIN RETIREMENT ACCT.				X							X		X	X			No INCOME DISTRIBUTION										
	STRONG TOTAL RETURN FUND				X							X		X	X			No INCOME DISTRIBUTION (IRA)										
	R+P DEVELOPMENT, (RENTAL REAL EST)					X							X						X									
	FIRSTAR CORP., STOCK.								X			X											X					
	FIRST WISC. NAT'L BANK, F.D.L. STOCK		X									X								X								
	WALGREEN CO., STOCK								X			X											X					X

For additional assets and unearned income, use next page

3124

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: T.E. Petri

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Bangor Co., Stock					X						X									X							
Associated Bancorp Stock		X									X							X									
Castle & Cooke, Stock				X							X							X									
Overseas Shipholding Group, Stock				X							X									X							
Lloyds, & 1st Nat'l Bank of Boston (Custodian Acct)					X								X	X			Insured Annuities							X			
Soo Line			X																								X
Commercial Clearing House, Stock				X							X									X							
Warner Communications, Bond.			X									X							X								
Air Wisconsin, Stock				X																							
Valley Bank Corporation, Stock					X						X										X						X

Reporting Individual's Name
T E Petri

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Soo Line Corp, Common Stock		X		1/24/90	X						
	Walgreen Corp, Common Stock	X			Dividend Reinvestment	X						
	Valley Bancorporation, Common Stock	X			Dividend Reinvestment	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	1st Wisc. Nat'l Bank, Milwaukee	Loan Secured by Stock				X			

Reporting Individual's Name
T. E. Petri

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Int'l Management Development Ass	Oct 28-30, 1990	Roundtrip Air from Wash. D.C. to London, 1 days food & lodging	Campaign Funds
Japan Society, Inc.	Nov. 13-16, 1990	Roundtrip Air from Wash. D.C. to Tokyo, 4 days food & lodging	Campaign Funds
Assoc. of Am. Railroads	Nov 11, 1990	Roundtrip Air from Wash. DC to Jackson, Miss. & Lunch	Sponsor
Assoc. of Foreign Investors in Congress	Mar 28 – June 2, 1990	Roundtrip Air fm Appleton, Wis. to Frankfurt to Munich, 4 days Food & Lodging	Campaign Funds

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
T. E. Petri

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	R & P Development, Rental Real Estate, Fond du Lac, Wisc
Partner	Lloyds, Underwriting Insurance Risks, London, England

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Thomas E. Petri	May 2, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 10:56

HAND DELIVERED

OWEN BRADFORD PICKETT
(Full Name)

1204 Longworth House Office Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State VA. District 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 15

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

use next page

Reporting Individual's Name

OWEN BRADFORD PICKETT

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X									X					
		182 Main Street, Dover, Delaware				X							X								X							
	Brass Circle Assocs. (Business: Ownership, rental, improvement and sale of real estate, Va. Beach, Va.)							X						X										X				
	Central Fidelity Bank - savings			X										X					X									
	Princess Anne Commercial Bank				X									X							X							
	Dominion Bank - savings						X							X								X						
	Independent Banks of Virginia stock				X							X							X									

earned income

Page 2 of 15

Financial Disclosure A-2

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: OWEN BRADFORD PICKETT

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Beverly Enterprises Mortgage Receivable							X						X										X				
Cranston Lane Assocs. (Business: Ownership, rental, improvement and sale of real estate, Va. Beach, Va.)							X					X	X										X				
Shipps Corner Nursery Co. (Business: Ownership, rental, improvement, and sale of real estate, Va. Beach, Va.)							X						X					X									
Lynnhaven Station Co. (Business: Ownership and rental of Commercial Offices, Va. Beach, Va.)								X				X	X											X			
Centocor Partners, II, LP (Business: Pharmaceuticals, Malvern, PA)				X									X					X									
Sherwood Crossing Assocs. (Business: Apartment construction and rental, Richmond, Va.)				X								X	X					X									
Nationwide Health Properties, Inc	S					X					X											X					
Toll South Assocs. (Business: Ownership, rental, improvement, and sale of real estate, Va. Beach, Va.)							X					X											X				

Reporting Individual's Name

OWEN BRADFORD PICKETT

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Caroline County, VA, farms ~~(Acreage: 795 acres plus~~ 328 acres (half-interest))								X				X									X					
Condo Unit (Cape Henry Towers, Va. Beach, VA)					X							X								X						
Harrell Farm Company ~~(Business: Farm Investments,~~ Va. Beach, Va.)						X							X	X								X				
Seaboard S & L Assocs - stock				X							X							X								X
The Commonwealth Bank - stock		X																X								
Carequest, Inc. (original value shown, now insolvent)				X														X								
Peoples Bank of Va. Beach-stock		X																X								
Magnolia Meadows Assoc. ~~(Business: Mobile Home Park,~~ Suffolk, Va.)							X											X								
GRA Independence Assoc. ~~(Business: Ownership, rental improvement, and sale of real~~ estate, Va. Beach, Va.)				X														X								

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: OWEN BRADFORD PICKETT

S DC JT	BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	BLOCK B Valuation of Asset: Category of Value (X) A none (or less than $1 001)	B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	BLOCK D Transaction (X)
	GRA Associates (Business: Ownership and rental of Apartments, Va. Beach, Va.)			X														X									
	Act B Partnership (Business: Ownership, rental, improvement and sale of real estate, Va. Beach, Va.)				X													X									
	Acreage, Hanover Co., VA. (26 acres - half-interest)						X											X									
	Sylakama, Inc. (Business: Ownership, rental, improvement, and sale of real estate, Va. Beach, Va.)					X												X									
	Genentech Clinical Partners IV (Business: Pharmaceuticals, San Francisco, CA.)			X														X									
	Chase Manhattan Corp.		X								X								X								X
	Dominion Bankshares Corp.		X								X								X								X
	Signet Banking Corp.		X								X							X									X
S	Chase Manhattan Corp.		X								X							X									X
S	Bowater Inc. Com.		X								X							X									X
S	Dominion Bankshares Corp.		X								X							X									X

Reporting Individual's Name
OWEN BRADFORD PICKETT

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S DC JT	Identify each asset and/or income source of yours, your spouse (S) and your dependent child (DC)	A none (or less than $1 001)	B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	Transaction (X)
S	Federal Paper Board Co.		X								X							X									X
S	Signet Banking Corp.		X								X							X									X
S	Ford Motor Co. Del		X								X							X									X
S	IRA Kidder, Peabody Investor Acct. consisting of:																										
	Boddie Noell Restaurant		X								X							X									X
	Chase Manhattan Corp.		X								X							X									X
	General Electric Co.		X								X							X									
	Int'l Business Machines		X								X							X									
	Merck & Co.		X								X							X									X
	Nationwide Health Properties			X							X								X								
	Commonwealth of VA DCP (State Retire)			X														X									
	Virginia Retirement System		X															X									
	IRA Kidder, Peabody Investor Acct. consisting of:																										
	Amer Home Products		X								X							X									X
	Boddie Noell Restaurant		X								X								X								X

Reporting Individual's Name

OWEN BRADFORD PICKETT

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1 001)	B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	Transaction (X)
S DC JT																									
IRA - continued:																									
Boise Cascade		X								X							X								X
Bowater Inc.		X								X							X								X
Bristol-Myers Squibb		X								X							X								
C&S Sovran Corp.		X								X								X							X
Chase Manhattan Corp.		X								X								X							X
Chemical Banking Corp.		X								X							X								X
Dominion Bankshares		X								X							X								
E.I. DuPont De Nemour		X								X							X								
Fed. Nat'l Mtg. Assn.		X								X							X								X
Federal Paper Board		X								X							X								X
Ford Motor Co.		X								X							X								X
General Electric		X								X							X								
Georgia Pacific Corp.		X								X							X								X
Int'l Business Machines		X								X							X								

Reporting Individual's Name

OWEN BRADFORD PICKETT

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1 001)	B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	Transaction (X)
S DC JT																									
IRA - continued:																									
James River Corp. of VA.		X								X							X								X
Lyondell Petrochemical Co.		X								X							X								X
Manuf Hanover Corp.		X								X							X								X
Merck & Co.		X								X							X								X
Nationwide Health Properties			X							X									X						
Public Svc Co. of Colorado		X								X							X								X
Signet Banking Corp.		X								X								X							X
UTS TEPPCO Partners LP Int		X														Partner. Distrib.		X							X
Weyerhaeuser Co.		X								X							X								X
Gov. Money Fund (cash)		X								X							X								
U.S. Treasury Note			X									X							X						X
Flippo Lumber (Caroline Co. Farms)																Timber Sale							X		

Reporting Individual's Name

OWEN BRADFORD PICKETT

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1 000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY, YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example ABC Corporation Common Stock	X			10 12 90			X				
	Best Buy, Inc. - stock		X		5/10/90 5/16/90		X					
	Dominion Bankshares	X			5/22/90 10/1/90	X						
	Chase Manhattan Corp.	X			4 trans. during yr		X					
	Signet Banking Corp.	X			9/28/90 10/18/90	X						
	Chemical Bkg. Corp. (sold for loss)	X	X		P - 6/21 S - 12/17	X						

** continued **

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles household furniture or appliances, and liabilities owed to a spouse child parent or sibling of the reporting individual or the reporting individual's spouse For further information see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Sovran Mortgage Corp.	Mortgage on Condo Unit, Cape Henry Towers, Va. Beach, Va.		X					
	Dominion Bank	Farm Mortgage		X					
	Dominion Bank	Personal Loan				X			
	E.D. & C.D. Proffitt	Farm Mortgage				X			
	Ashton Taylor	Farm Mortgage		X					

Reporting Individual's Name

OWEN BRADFORD PICKETT

PART IV—TRANSACTIONS - CONTINUED

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				
	Seaboard S & L	X			7 trans. during yr		X					
S	Chase Manhattan Corp.	X			7/31/90	X						
S	Bowater Inc. Com.	X			8/13/90	X						
S	Dominion Bankshares Corp.	X			7/11/90 12/3/90	X						
S	Federal Paperboard Co.	X			7/12/90	X						

** continued **

PART V—LIABILITIES - CONTINUED

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Princess Anne Commercial Bank	Business Investments		X					

Reporting Individual's Name
OWEN BRADFORD PICKETT

PART IV—TRANSACTIONS - CONTINUED

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H OVER $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Signet Banking Corp.	X			7/17/90	X						
S	Ford Motor Co. Del	X			9/27/90	X						
S	IRA - Kidder, Peabody Investor Acct. Transactions:											
	Boddie Noell Restaurant	X			6/22/90	X						
	Chase Manhattan Corp.	X			6/20/90	X						
	Eastman Kodak Co. (sold for loss)	X	X		P - 1/22 S - 6/20	X						
	IRA - Kidder, Peabody Investor Acct. Transactions:											
	U.S. Treasury Note Redemption		X		1/2/90		X					
	Eastman Kodak Co. (sold for loss)	X	X		P - 1/9 S - 6/20	X						
	Fed. Nat'l Mtg. Assn.	X			2/1/90	X						
	UTS TEPPCO Partners LP	X			3/7/90	X						
	FNMA Discount Notes Redemption		X		4/16/90		X					
	Sovran Finl Corp.	X			4/17/90 7/17/90	X						
	Georgia Pacific Corp.	X			4/23/90	X						
	Public Svc Co. of Colorado	X			4/23/90	X						

** continued **

Reporting Individual's Name
OWEN BRADFORD PICKETT

PART IV—TRANSACTIONS - CONTINUED

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,000 - OVER
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	IRA Transactions continued:											
	Signet Banking Corp	X			3 trans. during yr	X						
	James River Corp.	X			4/26/90	X						
	Boddie Noell Restaurant	X			6/15/90 6/18/90	X						
	Boise Cascade Corp.	X			7/12/90	X						
	Federal Paper Board	X			7/12/90	X						
	Manuf Hanover Corp.	X			7/19/90	X						
	Chase Manhattan	X			7/31/90	X						
	Bowater Inc.	X			8/10/90	X						
	Weyerhaeuser	X			8/14/90	X						
	Lyondell Petrochemical	X			8/14/90	X						
	Amer Home Products	X			8/14/90	X						
	Ford Motor Co.	X			8/15/90	X						
	Chemical Banking Corp.	X			9/25/90	X						
	Merck & Co	X			9/27/90	X						

** end **

Reporting Individual's Name

OWEN BRADFORD PICKETT

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government * and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
OWEN BRADFORD PICKETT

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Officer & Director	Sylakama, Inc.
Partner	Harrell Farm Co.
Partner	Lynnhaven Station Co.
Partner	GRA Assoc.
Partner	Brass Circle Assoc.
Partner	Act B Partnership
Partner	Toll South Assoc.
Partner	Cranston Lane Assoc.
Partner	Shipp's Corner Nursery Co.
Partner	GRA Independence Assoc.
Partner	Magnolia Meadows Assoc.
Partner	Centocor Partners II

** continued **

Reporting Individual's Name

OWEN BRADFORD PICKETT

PART VIII – POSITIONS - CONTINUED

Report the identity of all positions, compensated or uncompensated held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions page 22

EXCLUSIONS: Positions held in any religious, social, fraternal or political entities and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Sherwood Crossing Assoc, LP
Partner	Genentech Clinical Partners, IV, LP

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Owen Pickett	5-15-91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:14
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

James Jarrell Pickle
(Full Name)

242 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: TX District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

(Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Social Security Administration (Mr. Pickle)	Social Sec. Benefits	$16,154.00	
	Social Security Administration (Mrs. Pickle)	Social Sec. Benefits	3,788.40	
	American Council of Life Insurance (2-27-90)	Speech-Honorarium	1,000.00	
	Tax Executives Institute (3-20-90)	Speech-Honorarium	1,000.00	
	American Society of Assn. Executives (4-3-90)	Speech-Honorarium	1,000.00	
	Price Waterhouse - Wash. Tax Group (5-7-90)	Speech-Honorarium	1,000.00	
	Securities Industry Association (5-22-90)	Speech-Honorarium	1,000.00	
	Washington Tax Seminar (8-2-90)	Speech-Honorarium	1,000.00	X

For additional earned income, use next page

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Reporting Individual's Name

James Jarrell Pickle

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X							X								X
George Wash Credit Union Accounts				X									X							X						
182 Main Street, Dover, Delaware					X							X							X							
First City National Bank- Austin TX				X									X						X							
First Gibraltar-Austin, TX				X									X						X							
NCNB Money Market- Austin, TX				X									X							X						
NCNB Investment Fund-Austin,TX				X									X						X							
NCNB Resource Savings-Austin,TX				X									X							X						
NCNB IRAs - Austin, TX				X									X						X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James Jarrell Pickle

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Texas Commerce CDs-Austin, TX						X							X									X				(2 of 3) matured X 11-12-90
Bank One Money Market-Austin,TX			X										X					X									
Bank One CDs - Austin, TX				X									X								X						
Bank of the Hills CDs-Austin,TX				X									X								X						
Congressional Federal Credit Un.					X								X								X						
Paine Webber Tax Exempt Fund						X					X											X					sold X 10-4-90
Paine Webber Cash Fund			X										X					X									
RMA Tax Free Fund				X							X									X							
Trust Southwest			X										X							X							
University of Texas Bond						X							X										X				
North Central Austin Bond (MUD)			X										X						X								
*Royce City, TX Royce City School Bond					X								X									X					
*Austin, TX Eanes School Bond						X							X										X				
Austin, TX Lake Travis School Bond					X								X									X					

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James Jarrell Pickle

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	LCRA Bond - Austin, TX				X								X								X					X	matured 5-1-90
	Fort Bend, TX Bond			X									X							X							X	
	City of San Antonio, TX Bond			X									X								X						X	
	City of Austin, TX Bond			X									X							X							X	
	McLennan County, TX Bond			X									X								X						X	
	Arlington, TX Bond				X								X	X							X						X	matured 4-15-90
	North TX. State University Bond				X								X	X									X				X	matured 11-1-90
	Veterans Adm. Life Insurance		X										X							X								
	Grapevine-Colleyville Bond -TX			X									X								X							
	Austin Savings -Austin, TX			X									X							X								
	Paine Webber Asset Allocation Fund				X						X										X							
	Paine Webber MFS Intermediate Fund			X							X										X							
	Nuveen Municipal Fund		X								X									X								
	ACM Managed Income Fund			X							X											X						
	Damson Oil Royalty	X															Royalty	X										

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James Jarrell Pickle

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
*Niederwald, TX Lease of Land for Grazing	X										X							X							
Fidelity Bankers Life Ins. Annuity				X												Annuity	X									
Electrosource, Inc.-Austin, TX	X																X									
Paine Webber Equity Trust		X								X							X									
Paine Webber Property Invest. Fund			X							X										X						
Lots Near Lake LBJ-Llano, TX			X														X									
81.95 acres near Niederwald, TX					X						X							X								
41.3 acres near Niederwald, TX				X													X									
near Niederwald, TX Half Interest in 49.8 acres			X														X									
Bryan, TX ISD Bond				X								X								X						X
Rowlett, TX Bond				X								X								X						X
Pearland, TX Bond				X								X								X						X
Dennison, TX Waterworks Bond				X								X								X						X
Koch Oil Royalty	X															Royalty	X									X
LCRA Bond				X								X								X						X

*see first listing on this page

Reporting Individual's Name

James Jarrell Pickle

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Paine-Webber Tax Exempt Fund * sold at loss		X		10-4-90				X*			
	Arlington, TX Bond		X		4-15-90			X				
	N. TX State University Bond		X		11-1-90			X				
	Texas Commerce CDs (2 of 3 matured)		X		11-12-90				X			
	LCRA Bond		X		5-1-90				X			

PART V – LIABILITIES

NOTE: Part IV continues next page attachment A-3(1)

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	NCNB - Austin	Mortgage on 2702 Hillview Green Austin, TX					X		
	3900 Watson Place, Inc.	Mortgage on 3900 Watson Place Wash, DC	X						
	-John Joseph	Note for mortgage on Neuderwald, TX property --Paid in full Nov, 1990				X			

Reporting Individual's Name: James Jarrell Pickle

PART IV—TRANSACTIONS -Cont.

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	LCRA Bond	X			9-17-90		X					
	Bryan, TX ISD Bond	X			9-18-90			X				
	Rowlett, TX Bond	X			9-18-90			X				
	Pearland, TX Bond	X			9-25-90			X				
	Dennison, TX Waterworks	X			9-29-90			X				
	McLennan County, TX Bond	X			3-30-90		X					
	Fort Bend, TX Bond	X			4-16-90		X					
	San Antonio, TX Bond	X			4-1-90		X					
	City of Austin, TX Bond	X			5-29-90		X					
	Koch Oil Royalty - transferred from family member			X	1-1-90	*less than $100.00						
	Koch Oil Payment for Easement*				----							
	*One-time payment made in 1989; no further payments to be made											

Reporting Individual's Name: James Jarrell Pickle

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see instructions page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
James Jarrell Pickle

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Member, Bd. of Trustees	Southwestern University, Georgetown, TX
Member, Bd. of Directors	U.S. Capitol Historical Society, Washington, DC
Member, Bd. of Directors	National Wildflower Research Center, Austin, TX*

* Amendment submitted for 1989 statement in which this Board was referred to as wildlife rather than wildflower

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C. app 6, §104 and 18 U S C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J. J. Pickle	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 PM 4:31

HAND DE

(Office Use Only) 8

John Edward Porter
(Full Name)

1625 Sheridan Road
(Mailing Address)

Wilmette, Illinois 60091

Filer Status	[X] Member of the U.S. House of Representatives — State: Illinois District: 10th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Carnegie Council on Ethics & Internl Affairs, Inc.	Honorarium (1-18-90)	$ 2,000	
	Baxter Healthcare Corp.	Honorarium (2-21-90)	1,000	
	American Medical Association	Honorarium (2-27-90)	2,000	
	Coordinating Council for Cancer Research	Honorarium (2-28-90)	2,000	
	Abbott Laboratories, Inc.	Honorarium (2-28-90)	1,000	
	G.D. Searle & Co.	Honorarium (3-7-90)	2,000	
	A.B. Laffer Associates	Honorarium (3-20-90)	1,000	
	The Carpet & Rug Institute, Inc.	Honorarium (3-22-90)	2,000	
	National Association of Trade & Technical Schools	Honorarium (3-27-90)	2,000	
	Dow, Jones & Company, Inc.	Article (4-5-90)	100	

For additional earned income, use next page

Reporting Individual's Name

John Edward Porter

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
American Amusement Machine Association	Honorarium $1,000 (4-6-90) $500 (4-11-90)	$ 1,500	
National Council of Community Hospitals	Honorarium $1,000 (4-11-90) 1,000 (4-25-90)	2,000	
American Amusement Machine Association	Honorarium (6-11-90)	1,000	
George Mason University	Honorarium (6-14-90)	200	
Coalition for Employment Through Exports, Inc.	Honorarium $1,000 (6-29-90) 1,000 (10-18-90)	2,000	
Retail Confectioners International	Honorarium (9-11-90)	2,000	
Chicago Corporation	Honorarium (10-6-90)	2,000	
Michigan Road Builders Association	Honorarium (11-27-90)	1,000	
(S) Conservation International Foundation	Spouse Salary (10-1-90 to 12-31-90)		

Reporting Individual's Name
John Edward Porter

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	First Midwest Bank Individual Retirement Account		X										X						X								
	Cong. Federal Credit Union Individual Retirement Account		X										X						X								
	Franklin U.S. Gov. Sec. Fund Individual Retirement Account		X										X						X								
S	First Midwest Bank Individual Retirement Account		X										X						X								
S	Cong. Federal Credit Union Individual Retirement Account		X										X						X								
S	Franklin U.S. Gov. Sec. Fund Individual Retirement Account		X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name

John Edward Porter

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	None											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Cong. Federal Credit Union	Line of Credit	X						
	Margaret C. Brown	Line of Credit		X					

Reporting Individual's Name
John Edward Porter

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
Kemper Open Pro-Am Golf Tournament	Golf equipment and miscellaneous items	$196

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Coordinating Council for Cancer Research	Jan.6-9 1990	Travel from Wash.D.C. to Rio de Janeiro, Brazil and return, food and lodging, self and spouse	
Abbott Laboratories, Inc.	Feb.9-13 1990	Travel from Wash.D.C. to San Juan, Puerto Rico and return, food and lodging, self and spouse	
Baxter Healthcare Corp.	Feb.9-13 1990	Food and lodging, self and spouse, in Puerto Rico	
G.D. Searle & Co.	Feb.9-13 1990	Food and lodging, self and spouse, in Puerto Rico	
American Medical Association	Feb.23-26 1990	Travel from Wash.D.C. to Phoenix, Arizona, and return food and lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C 7342)

Reporting Individual's Name
John Edward Porter

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

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NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Congressional Human Rights Foundation	Mar.29-Apr.2,90	Travel from Wash. D.C, to York, England and return food and lodging, self and spouse	
The Aspen Institute for Humanistic Studies	Apr.11-16,1990	Travel from Wash. D.C. to Bermuda and return, food and lodging, self and spouse	
Michigan Road Builders Association	Aug.9-10 1990	Travel from Wash. D.C. to Traverse City. Michigan, and return, food and lodging, self and spouse	
Congressional Human Rights Foundation	Sept.1-4 1990	Travel from Prague, Czechoslavakia, via Shannon, Ireland, to Leningrad, USSR, and return to Wash.D.C.,	
Chicago Corporation	Sep. 17,	Travel from Wash., \food and lodging, self & spouse D.C. to New York City, N.Y. and return and food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
John Edward Porter

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

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NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Congressional Charity Golf Tournament		Nov.9-11 1990	Food and lodging, self and spouse, White Sulphur Springs, West Virginia	
Puerto Rico U.S.A. Foundation		Nov.27-Dec.2,90	Travel from Wash.D.C. to San Juan, Puerto Rico and return, self and spouse	
Puerto Rican Economic Development Administration		Nov.27-Dec.2,90	Food and lodging, self and spouse, in Puerto Rico	
Conggressional Human Rights Foundation		Dec. 7, 1990	Travel from Wash. D.C. to New York City, N.Y. and return and food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
John Edward Porter

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Board Member	Population Resource Center
President & Chairman	General Services Corporation
Co-Chairman	Congressional Human Rights Foundation
Co-Chairman	Congressional Human Rights Caucus

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app. 6, §104 and 18 U.S C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 NOV 15 PM 12 56

Glendal William Poshard
(Full Name)

103 Valley Drive
(Mailing Address)

Carterville, Illinois 62918

HAND DELIVERED.

Filer Status	[X] Member of the U S House of Representatives — State ____ District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

(Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. House of Representatives	Member's salary	NA	
	Carterville, IL Community Unit School District	Spouse salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
Glendal W. Poshard

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	Thrift Savings Plan U.S. House of Representatives				X										X							X								
	Savings Account Bank Carterville, IL State &Savings				X										X					X										
	Municipal Bonds - Imit 95 A.G. Edwards Investment Firm				X								X		X						X									
	Investment Income, Bank of NY First Investors Fund Inc.,NY				X								X		X						X									
	Savings Account Southern IL Schools Credit Un.			X											X					X										
	Individual Retirement Account King City FederalS&L Glenn P.					X									X							X								

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Glendal W. Poshard

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Individual Retirment Account																									
S	King City Fed. S&L-Jo Poshard			X									X							X						
	State Scholarship Bonds State of Illinois			X									X							X						
	Deferred Compensation Savings State of Illinois Plan			X									X							X						
	Annuity Columbus Mutual Life Ins. Co.			X									X								X					
	Annuity Edward D. Jones Investment Firm			X									X							X						
	Annuity Columbus Mutual Life Ins. Co.				X								X								X					
S	Retirement Funds Illinois State Retirment System			X									X							X						
	Retirement Funds Illinois State Retirement System			X									X							X						
	Life Insurance State Farm Insurance Co.		X								X		X						X							

Reporting Individual's Name

Glendal W. Poshard

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name
Glendal W. Poshard

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [x]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [x]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Glendal W. Poshard

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U.S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Glen Poshard	May 14, 1991

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

David Eugene Price
(Full Name)

106 Collums Road
(Mailing Address)

Chapel Hill, NC 27514

Filer Status	☑ Member of the U.S. House of Representatives — State NC, District 4	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

HAND DELIVERED

mc (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	CQ Press	royalty	428.60	
	University of Oklahoma	Speech	1000.00	
	Yale University Divinity School	named lecture	500.00	
	American Political Science Association	Award	500.00	
	Town of Chapel Hill, NC	spouse salary	NA	

For additional earned income, use next page

Reporting Individual's Name: David Eugene Price

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Home S+L Certificate of deposit			X									X								X						
	Smith Barney Money Market Units		X								X									X							
	NC Eastern Municipal Power Agency Bonds			X									X							X							
	American Precision Industries stock		X								X							X									
	Pepsico Stock		X								X							X									
	Coca-Cola stock		X								X							X									

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: David Eugene Price

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	General Electric stock		X								X							X									
	Merck & Co. stock		X								X							X									
	Northwest Mutual Life Ins Policy		X								X								X								

Reporting Individual's Name
David Eugene Price

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	NONE								

Reporting Individual's Name
David Eugene Price

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☑

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse	
see attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

David Eugene Price

PART VII -- "REIMBURSEMENTS" AND GIFTS. . .

Source	Dates	Brief Description
Anti-defamation League of B'nai Brith	1/3-1/12	travel to/from Israel with spouse, lodging and meals
Yale Divinity School, Yale University	2/13-2/14	travel to/from New Haven, CT; lodging and meals
The Human Rights Project, Inc.	2/15-2/20	travel to/from Nicaragua, lodging and meals
Carl Albert Center University of Oklahoma	4/13	travel to/from Oklahoma City, OK; meals
German Marshall Fund of U.S.	5/26-6/4	travel to/from Germany, Hungary, Czechoslovakia w/ spouse, lodging & meals
Eastern Kentucky University	6/21-6/22	travel to/from Atlanta, lodging & meals
Nat'l Association of Realtors	11/8-11/10	travel to/from New Orleans with spouse, lodging & meals
Yale University	11/15-11/16	travel to/from New Haven, CT, lodging & meals

NONE WERE GIFTS

Reporting Individual's Name
David Eugene Price

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Professor (on leave)	Duke University

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1988-90	Duke University	leave of absence (unpaid)

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
David E. Price	5/14/91

GPO 1991 37-598 (m)

DAVID PRICE
4TH DISTRICT
NORTH CAROLINA

COMMITTEE ON APPROPRIATIONS

HAND DELIVERED

1991 MAY 29 PM 12: 25
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

OFFICES
1406 LONGWORTH BUILDING
WASHINGTON, D.C. 20515
(202) 225-1784
225 HILLSBOROUGH STREET
SUITE 330
RALEIGH, N.C. 27603
(919) 856-4611
1777 CHAPEL HILL DURHAM BLVD
SUITE 202
CHAPEL HILL, N.C. 27514
(919) 967-8500
SUITE 101
FEDERAL BUILDING
ASHEBORO, N.C. 27203
(919) 626-3060

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES
WASHINGTON, D.C. 20515

May 29, 1991

Chariman Louis Stokes
Committee on Standards of Official Conduct
HT2 Capitol Building
INSIDE MAIL

MC (8)

Dear Louis:

I have amended my financial disclosure to show the transactions of my purchased holdings. The National Liquid Reserves units shown on the 1989 disclosure form is the same asset as the Smith Barney money market units shown on the 1990 form. The National Liquid Reserves is a particular money market fund that Smith Barney offers.

Sincerely,

DAVID PRICE
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 10:38 AM MAY 29 PM 12:25

David Eugene Price
(Full Name)

106 Collums Road
Chapel Hill, NC 27514
(Mailing Address)

HAND DELIVERED

mc
(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: NC District: 4	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
CQ Press	royalty	428.60	
University of Oklahoma	Speech	1000.00	
Yale University Divinity School	named lecture	500.00	
American Political Science Association	Award	500.00	
Town of Chapel Hill, NC	spouse salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
David Eugene Price

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Home S+L Certificate of deposit			X									X								X						
	Smith Barney Money Market Units		X								X									X							
	NC Eastern Municipal Power Agency Bonds			X									X							X							
	American Precision Industries stock		X								X							X									
	Pepsico Stock		X								X							X									
	Coca-Cola Stock		X								X							X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: David Eugene Price

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
General Electric stock			X								X							X									
Merck + Co. stock			X								X							X									
Northwest Mutual Life Ins Policy			X								X								X								

Reporting Individual's Name
David Eugene Price

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

D Price (amended 5/29/91) NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	~~NONE~~ COCA COLA CO COMMON STOCK	X			7/10/90	X						
	GENL. ELECTRIC CO. " "	X			7/10/90	X						
	PEPSICO INC. " "	X			7/10/90	X						
	MERCK + CO. " "	X			7/12/90	X						
	NC EASTERN MUN POWER AGENCY BONDS	X			6/18/90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NONE								

Reporting Individual's Name
David Eugene Price

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☑

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
see attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

David Eugene Price

PART VII -- "REIMBURSEMENTS" AND GIFTS. . .

Source	Dates	Brief Description
Anti-defamation League of B'nai Brith	1/3-1/12	travel to/from Israel with spouse, lodging and meals
Yale Divinity School, Yale University	2/13-2/14	travel to/from New Haven, CT; lodging and meals
The Human Rights Project, Inc.	2/15-2/20	travel to/from Nicaragua, lodging and meals
Carl Albert Center University of Oklahoma	4/13	travel to/from Oklahoma City, OK; meals
German Marshall Fund of U.S.	5/26-6/4	travel to/from Germany, Hungary, Czechoslovakia w/ spouse, lodging & meals
Eastern Kentucky University	6/21-6/22	travel to/from Atlanta, lodging & meals
Nat'l Association of Realtors	11/8-11/10	travel to/from New Orleans with spouse, lodging & meals
Yale University	11/15-11/16	travel to/from New Haven, CT, lodging & meals

NONE WERE GIFTS

Reporting Individual's Name
David Eugene Price

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Professor (on leave)	Duke University

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1988-90	Duke University	leave of absence (unpaid)

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

D. Price 5/29/91

SIGNATURE OF REPORTING INDIVIDUAL: David E. Price

DATE (Month, Day, Year): 5/14/91

GPO 1991 37-588 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2:41
U.S. H...

Carl D. Pursell
(Full Name)

1414 Longworth Building
(Mailing Address)

Washington D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Michigan District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Livonia, Michigan Public Schools	Spouse Salary	NA	
	Electronic Data Systems Corporation 2-2-90	Honorarium	500.00	
	RBC Associates 2-22-90	Honorarium	2000.00	
	International Industrial Symposium on the SSC 3-15-90	Honorarium	2000.00	
	American Medical Association 3-16-90	Honorarium	1000.00	
	Hopkins County Texas Chamber of Commerce 3-19-90	Honorarium	1000.00	
	Edison Electric Institute 3-21-90	Honorarium	250.00	
	Puerto Rico Hospital Association 4-4-90	Honorarium	2000.00	
	General Atomics Corporation 5-18-90	Honorarium	2000.00	
	Childrens Hospital of San Diego 5-18-90	Honorarium	1000.00	

For additional earned income, use next page

Reporting Individual's Name
Carl D. Pursell

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
Libby Owens Ford	5-21-90	Honorarium	500.00	
Unisys	7-17-90	Honorarium	1000.00	
Waste Management Inc.	11-16-90	Honorarium	2000.00	
Illinois Central Railroad	11-16-90	Honorarium	1000.00	
American Consulting Engineers	12-1- 90	Honorarium	500.00	
Chicago Board of Trade	12-5- 90	Honorarium	750.00	
Chicago Mercantile Exchange	12-5- 90	Honorarium	750.00	

Reporting Individual's Name

Carl D. Pursell

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman Credit Union		X										X						X								
	Sears Stock		X								X							X									
	home & 6 Acres of land 46200 N. Territorial Rd. Plymouth, Michigan						X																				

For additional assets and unearned income, use next page

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Reporting Individual's Name

Carl D. Pursell

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Wright Patman Credit Union	Personal Loan	X						
	Great Lakes Bancorp	Personal Loan		X					

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Reporting Individual's Name: Carl D. Pursell

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
U.S. Tobacco Company Inc.		1-5-90 1-7-90	Air Travel Detroit to West Palm Beach to Detroit 2 Days Food and Lodging	
RBC Associates		2-22-90 2-23-90	Air Travel Miami to Tuscon to Detroit 1 Day Food and Lodging	
International Industrial Symposium on SSC		3-15-90	Air Travel Washington to Miami 1 Day Food and Lodging	
American Medical Assn.		3-16-90 3-18-90	Air Travel Miami to Naples, 2 Days Food and Lodging Air Travel Fort Myers to Dallas	
Hopkins County Tx. Chamber of Commerce		3-19-90	1 Day Food and Lodging Air Travel Dallas to Washington	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Carl D. Pursell

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6 8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse	
Warner Lambert	4-4-90 4-5-90	Air Travel Washington to San Juan to Washington 2 Days Food and Lodging	
General Atomics	5-17-90 5-18-90	Air Travel Washington to San Diego to Washington 1 Day Food and Lodging	
Waste Management Inc.	11-20-90	Air Travel Detroit to Chicago to Detroit	
Chicago Board of Trade	12-7-90	Air Travel Washington to Chicago to Washington	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Carl D. Pursell

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Carl D. Pursell	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 1:32
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

JAMES H. QUILLEN
(Full Name)

102 CANNON HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: TN District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)		Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)		Article	$500	X
	ABC Corporation		Director's Fee	$6,000	
	Fairfax County Board of Education		Spouse Salary	NA	
	Bell South	(4/9/90)	Honoraria	2,000	X
	Outdoor Advertising Association	(4/9/90)	Honoraria	2,000	X
	Florida Letter Carriers	(4/11/90)	Honoraria	2,000	X
	District 2 - MEBA - AMO	(4/12/90)	Honoraria	2,000	X
	National Coal Association	(5/16/90)	Honoraria	2,000	X
	Phillip Morris	(5/24/90)	Honoraria	2,000	X
	United States Telephone Association	(7/19/90)	Honoraria	2,000	X
	Raytheon	(8/1/90)	Honoraria	2,000	X
	Federal Express	(8/28/90)	Honoraria	2,000	X
	Tennessee Savings Institutions	(9/17/90)	Honoraria	2,000	X

For additional earned income, use next page

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Reporting Individual's Name
JAMES H. QUILLEN

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
American Trucking Association	(9/19/90)	Honoraria	2,000	
National Restaurant Association	(10/3/90)	Honoraria	2,000	
Chicago Mercantile Exchange/Chicago Board of Trade	(11/12/90)	Honoraria	2,000	
Tennessee Farm Bureau Federation	(11/26/90)	Honoraria	2,000	
Tennessee Farmers Mutual Insurance Co.	(11/26/90)	Honoraria	2,000	
RJR Nabisco	(12/4/90)	Honoraria	2,000	
Interstate Natural Gas	(12/5/90)	Honoraria	2,000	
CSX/Association of American Railroads	(12/5/90)	Honoraria	2,000	
Grocery Manufacturers Association	(12/5/90)	Honoraria	1,000	
United States Telephone Association	(12/5/90)	Honoraria	2,000	
Phillip Morris USA	(12/9/90)	Honoraria	2,000	
Aerojet	(12/11/90)	Honoraria	2,000	
Nuclear Fuel Services	(12/20/90)	Honoraria	2,000	

Reporting Individual's Name
JAMES H. QUILLEN

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	(formerly Home Federal Savings & Loan) Home Financial Corporation stock							X			X													X			
	Thomas Nelson, Inc. common stock					X					X									X							
	Thomas Nelson, Inc., Class B, common stock			X							X								X								
	H Q Office Supplies Warehouse stock		X								X							X									
	Model City Investment Company stock							X		X - Book Value	X										X						
	Executive Park National Bank stock		X								X							X									

For additional assets and unearned income, use next page

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Reporting Individual's Name

JAMES H. QUILLEN

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Legume stock		X								X							X									
	Ice Dreams, Inc. stock		X								X							X									
	Contour Industries stock			X							X							X									
	H Q Office Supplies Warehouse 1994 Warrants	X																X									
	Eastman Kodak Company stock					X					X							X				X					Purch 1/22/90
	(Hilliard-Lyons - broker) Cash Equivalent Fund-Money Market stock				X						X									X							
	PB Moneymart Assets (Prudential Bache)	X									X							X									
	Federal Farm Credit Banks bonds								X				X											X			
	Heritage Federal Bank, FSB							X					X											X			
S	Home Federal Savings & Loan Association		X										X										X				
	First Tennessee Bank							X					X										X				
S	First Tennessee Bank					X							X									X					
	HEMPED (Heritage Federal Trust Department)						X						X									X					
	STHARCO note receivable								X				X											X			
	Johnson City Insurance Co.-Wofford Bros. note receivable								X				X											X			

Reporting Individual's Name

JAMES H. QUILLEN

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) (2)

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)										
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Douglas Sizemore note receivable					X							X								X						
Non-competitive Agreement - STHARCO						X										Non-Compet. Agreement					X					
Non-competitive Agreement - Johnson City Wofford Bros.						X										Non-Compet. Agreement					X					
James Laws note receivable		X										X						X								
Land, E. Stone Drive, Kingsport, TN						X																				
(First Tennessee Bank) Individual Retirement Account			X													IRA Distribut.			X							
(First Tennessee Bank) Individual Retirement Account			X													IRA Distribut.			X							

Reporting Individual's Name

JAMES H. QUILLEN

PART IV—TRANSACTIONS (1)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Biomechanics Corporation stock	X			1-17-90	X						
	Biomechanics Corporation stock		X		1/22/90	X						
	Federal Farm Credit Banks bonds (redeemed)		X		4-2-90						X	
	Eastman Kodak Company stock	X			1-22-90				X			
	H Q Office International, Inc. A stock	X			4-10-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Johnson City Insurance Agency, Inc.	Life insurance policy		X					

Reporting Individual's Name

JAMES H. QUILLEN

PART IV—TRANSACTIONS (2)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	H Q Office International, Inc. A stock	X			1-22-90	X						
JT	H Q Office International, Inc. A stock	X			1-23-90	X						
JT	H Q Office International, Inc. A Warrants - 1994	X			8-22-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	K over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name

JAMES H. QUILLEN

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
District 2, MEBA - AMO	4/12/90	Roundtrip airfare - Kingsport, TN to Ft. Lauderdale, FL, food, and lodging, Member and spouse	
Southeastern Hospital Conference	4/30/90	Roundtrip airfare - Kingsport, TN to Atlanta, GA, food, member	
Tennessee Savings Institutions	9/17/90	Roundtrip airfare - Kingsport, TN to Brunswick, GA to Washington, D.C.-Kingsport Food	
Chicago Mercantile Exchange & Chicago Board of Trade	11/12/90	Roundtrip airfare - Kingsport, TN to Chicago, IL, food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
JAMES H. QUILLEN

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James H. Quillen	5/15/91

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

NICK J. RAHALL, II
(Full Name)

1801 Harper Road Beckley, West Virginia 25801
(Mailing Address)

HAND DELIVERED

Filer Status	[X] Member of the U.S. House of Representatives	State: WV District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 454

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Ashland Oil Company rec'd 1/4/90	Honorarium	2,000.00	
	American Mining Congress rec'd 2/9/90	"	2,000.00	X
	Maritime Trades rec'd 2/14/90	"	1,500.00	
	ASARCO, Inc. rec'd 2/19/90	"	1,000.00	
	Association of American Railroads rec'd 3/7/90	"	1,000.00	
	American Roadbuilders rec'd 3/5/90	"	1,500.00	
	Bethlehem Steel rec'd 3/21/90	"	1,000.00	
	Interstate Nat. Gas. Assoc. rec'd 4/4/90	"	2,000.00	
	Phillip Morris Companies rec'd 5/22/90	"	2,000.00	X
	Distilled Spirits Council rec'd 5/24/90	"	2,000.00	

For additional earned income, use next page

Reporting Individual's Name

NICK J. RAHALL, II

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
RJR Nabisco rec'd 5/29/90	Honorarium	2,000.00	
American Trucking Assoc. rec'd 7/11/90	"	1,000.00	
Eastern Central Motor Carriers rec'd 7/18/90	"	2,000.00	
National Stone Assoc. rec'd 9/11/90	"	2,000.00	X
Management Assoc. for Private Photogrammetric Surveyors rec'd 9/11/90	Honorarium	1,000.00	
Outdoor Advertising Association rec'd 9/12/90	"	1,000.00	
Fairchild International rec'd 10/5/90	"	300.00	
U. S. Council for Energy Awareness rec'd 10/23/90	"	2,000.00	
Interstate Natural Gas Association Foundation rec'd 11/13/90	"	2,000.00	
Chicago Merchantile rec'd 12/5/90	"	750.00	
Chicago Board of Trade rec'd 12/5/90	"	750.00	
WTNJ Christmas bonus rec'd 12/7/90	Bonus	1,000.00	X
Philip Morris rec'd 12/24/90	Honorarium	2,000.00	X

Reporting Individual's Name

NICK J. RAHALL, II

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X									X
			George Wash Credit Union Accounts			X									X									X						
			182 Main Street, Dover, Delaware				X							X								X								
	Investment Property - Grandview Shady Spring, Ral. County - WV					X										X								X						
	Investment Property corner Harper Rd. and Carriage Dr. Beckley, WV				X									X											X					
	SBR, Inc. Parkersburg WV-Pt. owner bldg. and land & 7-11 in Ral. County					X								X					% of sales					X						
DC	Shearson, Loeb and Rhoades, Inc. Stock Broker (see #1 Attached)							X					X		X	X									X					See print outs #1 for full details
	Investment Property Harper Rd Co-Mac bldg. (EGR Industries) Beckley, WV					X								X									X							
DC	Wheat First Securities (see #2 attached)							X					X			X									X					See print outs #2 for full details

For additional assets and unearned income, use next page

3200

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: NICK J. RAHALL, II

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Sante Fe Industries	X								X								X								
	First National Bank	X								X								X								
	Raleigh County National Bank	X								X								X								
	N.J. Rahall, II Trust (Edward Rahall						X			X		X	X									X				see print out #3 for full details
	Trustee) with Shearson Lehman Brothers + with Wheat First Securities #3				X					X		X	X								X					" " " "
	Electro-Nucleionics, Inc.	X										X						X								
	Wheat First Securities - Broker NJR# only #4					X				X		X	X								X					see print out #4 for full details
	Shearson, ~~Loeb, and Rhoads~~ Lehman Brothers, Inc. Broker NJR# only #5				X					X		X	X								X					see print out #5 for full details
	WV Broadcasting/WINJ leased land I own to " " for radio antenna	X														lease of land to WINJ for Antenna					X					
	Owner financed sale of Hernando Co. FL land w/ brother, Father, & Uncles				X							X	X			Real Estate sale pending										
	Rahall Realty, Inc. (12½%)		X							X									X							
	H. L. and R. Corp. (WV) ½ w/ brother Raleigh Co. land and money market					X				X			X									X				
DC	MFS Mutual Funds & American Capital 3 children only (see #6 attached)	X								X		X	X						X							see print out #6 for full details

Financial Disclosure A-2(a)

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

(CONTINUATION)

Reporting Individual's Name

NICK J. RAHALL, II

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Shearson Lehman Futures, 1000 (see #7 attached)		X								X		X							X							(see #7 attached) X
Bank of Northern Virginia		X																								
Hilton Head, SC Property time sharing (2 wks peak season)		X																								
Glade Spring, Raleigh Co., WV lot (1/5 owner)		X																								
West Virginia Broadcasting station WINJ-FM Mt. Hope, WV stock					X																					
Shearson American Express, Inc. #8 IRA Account (see printout for details)		X								XX			X					X								see printout for details #8
Real Estate Flat Top Lake, Raleigh County WV			X																							

Reporting Individual's Name

NICK J. RAHALL, II

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
and 3 DC	Wheat First Securities (See attached statements #2,34 for complete details)											
and 3 DC	Shearson/ Lehman Brothers Inc. (See attached statements #135 for complete details)											
	Shearson/ Lehman Brothers IRA (See attached statements #9 for complete details)											
3DC	American Capital MFS Mutual Funds #6 (See attached statements for complete details)						X					
	Shearson Lehman Futures, 1000 (See attached statements #7 for complete details)											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Shearson, Lehman Hutton	Margin Account				X			
	E.G.R. Industries	Notes on Hilton Head, SC land my ½				X			

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Reporting Individual's Name
NICK J. RAHALL, II

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Holiday Inn -Huntington, WV	Lodging	722.00
Agem Golf Company	personalized driver (golf club)	106.00
WTNJ	gift certificate	300.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Ashland Oil	1/4-5/90	Air travel from Charleston, WV to New Orleans (speech) one night lodging	
ASARCO, Inc.	1/5-7/90	Air travel from New Orleans to Phoenix, AZ to Beckley, WV (speech) 2 nights lodging	
Maritime Trades Department	2/14-17/90	air travel from Charleston, WV to Miami roundtrip (speech) 3 nights lodging	
Assoc. of American Railroads	3/3-4/90	air travel from Charleston, WV to Phoenix, AZ to Wash. DC one hight lodging (speech)	
Interstate Nat. Gas Assoc.	4/5-9/90	air travel from Wash. DC to Naples, FL and Ft. Myers, FL to Charleston, WV 2 nights lodging (speech) extra days at own expense	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
NICK J. RAHALL, II

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

CONTINUATION I NICK J. RAHALL, II

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Managment Assoc. of Private Photogrammetric Surveyors		7/7-8/90	air travel from Wash. DC to Seattle, WA to Charleston, WV one night lodging (speech)	
Eastern Motor Carriers Assoc.		7/22-23	one night lodging air travel from Evansville, IN to Akron, OH Cleveland, OH to Wash. DC (speech)	
Natinal Stone Assoc.		9/10/90	air travel from Wash. DC to Pittsburgh, Pa roundtrip (speech)	
U. S. council for Energy Awareness		9, 16-17/90	air travel from Wash. DC to San Antonio roundtrip (speech) one night lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

CONTINUE

Financial Disclos...

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Reporting Individual's Name

NICK J. RAHALL, II

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

CONTINUATION II NICK J. RAHALL, II

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Interstate Natural Gas Assoc. Foundation		11/17-21/90	air travel from Wash. DC to Orlando, FL(extra days at own expense) Speech	
Chicago Merchantile		12/6/90	air travel from Wash. DC to Chicago, IL roundtrip (Speech)	
National Motor Freight		6/21-24/90	air travel from Wash. DC to Dubuque, Iowa roundtrip Lodging and golf	X
WTNJ - WV Broadcasting, Inc.		Full year	Personal use of company car	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
NICK J. RAHALL, II

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	WV Broadcasting Corporation
Trustee	Victoria Lynn Rahall Hassler Trust
Vice President and Secy.	Rahall Realty; H. L. & R Corp. and EGR Industries
Trustee	Mary Alice Rahall Trust
Trustee	Edward G. Rahall Trust
Trustee	Tanya Alice Rahall Trust

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Nick J. Rahall II

DATE (Month, Day, Year): May 15, 1991

GPO 1991 17-598 (m)

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SHEARSON LEHMAN HUTTON

Client statement
January 15 - January 28, 1990

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

#1

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

Account value

Money funds	$ 2,474.56
Stocks	69,903.13
Bonds	7,305.00
Net value this period	**$ 79,682.69**
Net value last period	**$ 87,656.70**

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ .10	$ .10	$ 0.00
Dividends	39.50	39.50	0.00
Money funds earnings	12.23	12.23	0.00
Total	**$ 51.83**	**$ 51.83**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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SHEARSON LEHMAN HUTTON

Client Statement

January 1 - January 29, 1990

NICHOLAS RAHALL JR ACCT

Account number 685-06692-16 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 4,053.32
Securities bought and other subtractions		7,500.25	
Securities sold and other additions	5,869.66		
Interest credited	10		
Dividends credited	39.50		
Money funds earnings reinvested	12.23		
Total	$ 5,921.49	$ 7,500.25	
Combined closing cash and money funds balance			$ 2,474.56

Money funds	2,474.56

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/26/90

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	2,474.56	$ 2,474.56	7.82%	Accrued dividends of $ 10.46
Total value of money funds		$ 2,474.56		

Stocks

Common stocks

Description	Exchange	Number of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	75	$ 57.875	2.073%	$ 90.00	$ 4,340.63	Symbol: BA\Rated: B+
BURLINGTON RES INC	NYSE	100	41.75	1.532	64.00	4,175.00	Symbol: BR
COMTEL CORPORATION	NYSE	200	26.125	4.21	220.00	5,225.00	Symbol: CTC\Rated: A
JOHNSON & JOHNSON	NYSE	100	52.875	2.193	116.00	5,287.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	61.875	2.65	164.00	6,187.50	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	35.125			7,025.00	Symbol: MCIC\Rated: B
PFIZER INC	NYSE	100	67.75	3.542	240.00	6,775.00	Symbol: PFE\Rated: A+
TOYS R US	NYSE	200	36.75			7,350.00	Symbol: TOY\Rated: B+
UNOCAL CORP	NYSE	200	27.125	2.58	140.00	5,425.00	Symbol: UCL\Rated: B

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Account number 685-06692-16 240

ocks *ntinued*

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
WAL MART STORES INC	NYSE	300	$ 42 125	522%	$ 66 00	$ 12 637 50	Symbol WMT\Rated A+
WARNER LAMBERT CO	NYSE	50	109 50	2 776	152 00	5 475 00	Symbol WLA\Rated B+
Total value of stocks					**$ 1,252 00**	**$ 69,903 13**	

onds

Some bond values provided by outside pricing services may be inaccurate They are provided only as a guide to determining portfolio value For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000 00	0.00%	01/01/15	7 305		$ 7,305 00	Callable on 01/01/93 Call price $ 103 00 Rated A1/A+
Total value of bonds					**$ 0 00**	**$ 7,305 00**	

Transaction details

ivestment ctivity

Date	Activity	Description	Quantity	Price	Amount
01/23/90	Sold	AMERICAN EXPRESS CO SHEARSON LEHMAN HUTTON IS A SUBSIDIARY OF THIS FIRM NO DIFFERENTIAL	50	$ 32 50	$ 1 574 94
01/23/90	Bought	TOYS R US AVG PRICE SHOWN DETAILS ON REQ	200	36 923	7 500 25
01/23 90	Sold	WAL MART STORES INC	100	43 625	4 294 72
Total securities bought and other subtractions					**$ -7 500 25**
Total securities sold and other additions					**$ 5 869 66**

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Account number 685-06692-16 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge *Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
01/22/90	INTEREST ON CREDIT BALANCE AT 7.648% 12/29 THRU 1/21	$ .10			$ .10
Total interest earned		**$ .10**	**$ 0.00**		**$ .10**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/02/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 12/15/89 PAY 01/02/90	$ 17.50			$ 17.50
01/02/90	WAL MART STORES INC CASH DIV ON 400 SHS RECORD 12/11/89 PAY 01/02/90	22.00			22.00
Total dividends earned		**$ 39.50**	**$ 0.00**		**$ 39.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/12/90	SLH DAILY DIVIDEND FUND	$ 12.23		Reinvested	$ 12.23
Total earnings from money funds		**$ 12.23**	**$ 0.00**		**$ 12.23**

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 3,964.10**
01/03/90	AutoInvest	SLH DAILY DIVIDEND FUND	128.72	128.72
01/23/90	Redemption	SLH DAILY DIVIDEND FUND	1,630.49	-1,630.49
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	12.23	12.23
	Closing money funds balance			**$ 2,474.56**

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Stocks
continued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
WAL-MART STORES INC	NYSE	300	$ 40.625	541%	$ 66.00	$ 12,187.50	Symbol WMT\Rated A+
WARNER-LAMBERT CO	NYSE	50	99.75	3.047	152.00	4,987.50	Symbol WLA\Rated A-
Total value of stocks					**$ 1,252.00**	**$ 67,450.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	7.851		$ 7,851.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 7,851.00**	

Earnings details

The tax status of earnings is reliable to the best of our knowledge securities, not of your account. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/90	INTEREST ON CREDIT BALANCE AT 7.722% 1/22 THRU 2/20	$ 12			$ 12
Total interest earned		**$ .12**	**$ 0.00**		**$ .12**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	AMERICAN EXPRESS CO CASH DIV ON 50 SHS RECORD 01/05/90 PAY 02/09/90	$ 11.50			$ 11.50
02/09/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 01/10/90 PAY 02/09/90	35.00			35.00
Total dividends earned		**$ 46.50**	**$ 0.00**		**$ 46.50**

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LEHMAN HUTTON

Client Statement
January 29 - February 25, 1990

NICK JOE RAHALL II ACF

Account number 685-06692-16 240

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 2,474 58**
	Amounts added	Amounts subtracted	
Interest credited	12		
Dividends credited	46 50		
Money funds earnings credited	1 59		
Money funds earnings reinvested	17 83		
Total	$ 66 04	$ 0 00	
Combined closing cash and money funds balance			**$ 2,540 60**

Cash	46 62
Money funds	2,493.98

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 02/23/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	2,493.98	$ 2,493 98	7.512%	Accrued dividends of $ 5 63
Total value of money funds		**$ 2,493 98**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	75	$ 60 00	2 00%	$ 90 00	$ 4,500 00	Symbol BA\Rated A-
BURLINGTON RES INC	NYSE	100	42 50	1 505	64 00	4,250 00	Symbol BR
CONTEL CORPORATION	NYSE	200	26 125	4 21	220 00	5,225 00	Symbol CTC\Rated A-
JOHNSON & JOHNSON	NYSE	100	52 125	2.225	116 00	5,212 50	Symbol JNJ\Rated A
ELI LILLY & CO	NYSE	100	59 125	2 773	164 00	5,912 50	Symbol LLY\Rated A+
MCI COMMUNICATIONS CORP	OTC	200	32 00			6,400 00	Symbol MCIC\Rated B
PFIZER INC	NYSE	100	56 25	4.266	240 00	5,625 00	Symbol PFE\Rated A+
TOYS R US	NYSE	200	36 00			7,200 00	Symbol TOY\Rated B+
UNOCAL CORP	NYSE	200	29 75	2 352	140 00	5,950.00	Symbol UCL\Rated B

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Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	SLH DAILY DIVIDEND FUND	$ 17.83		Reinvested	$ 17.83
02/14/90	SLH DAILY DIVIDEND FUND CASH DIV	1.59		Credited to account	1.59
Total money funds earnings credited to account					**$ 1.59**
Total money funds earnings reinvested					**$ 17.83**
Total earnings from money funds		**$ 19.42**	**$ 0.00**		**$ 19.42**

Money funds details

All transactions are traded at $1.00 per share

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Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 2,474.56**
02/14/90	Redemption	SLH DAILY DIVIDEND FUND EXCHANGE REDEMPTION	2,492.39	-2,492.39
02/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	2,493.98	2,493.98
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	17.83	17.83
	Closing money funds balance			**$ 2,493.98**

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SHEARSON LEHMAN HUTTON

Client Statement
January 29 - February 25, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ 46 62
Money funds		2,493 98
Stocks		67,450 00
Bonds		7,851 00
Net value this period		**$ 77,841.60**
Net value last period	**$ 79,682 69**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 12	$ 22	$ 0.00
Dividends	46 50	86 00	0.00
Money funds earnings	19 42	31 65	0 00
Total	**$ 66 04**	**$ 117 87**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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SHEARSON LEHMAN HUTTON

Client Statement
February 26 - March 31 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance	$ -3,245.12
Money funds	0.00
Stocks	77,993.75
Bonds	7,851.00
Certificates of deposit	2,500.00
Net value this period	**$ 85,099.63**
Net value last period	**$ 77,841.60**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .15	$ .37	$ 0.00
Dividends	245.50	331.50	0.00
Money funds earnings	14.27	45.92	0.00
Total	**$ 259.92**	**$ 377.79**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 2,540 60
Securities bought and other subtractions		-6,045 64	
Securities sold and other additions	0.00		
Interest credited	.15		
Dividends credited	245 50		
Money funds earnings credited	1 28		
Money funds earnings reinvested	12 99		
Total	$ 259 92	$ -6,045.64	
Combined closing cash and money funds balance			$ -3,245.12

Cash	-3,245 12
Money funds	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/30/90.

tocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	75	$ 71 75	1 672%	$ 90 00	$ 5,381 25	Symbol BA\Rated A-
BROWNING-FERRIS INDUSTRIES INC	NYSE	100	36 50	1 753	64 00	3,650 00	Symbol BFI\Rated A+
BURLINGTON RES INC	NYSE	100	39 625	1 615	64 00	3,962 50	Symbol BR
CONTEL CORPORATION	NYSE	200	28 50	3 859	220 00	5,700 00	Symbol CTC\Rated A-
JOHNSON & JOHNSON	NYSE	100	56 125	2 066	116 00	5,612 50	Symbol JNJ\Rated A
ELI LILLY & CO	NYSE	100	64 625	2 537	164.00	6,462 50	Symbol LLY\Rated A+
MCI COMMUNICATIONS CORP	OTC	200	36 75			7,350 00	Symbol MCIC\Rated B
PFIZER INC	NYSE	100	60.625	3 958	240 00	6,062 50	Symbol. PFE\Rated A+
TOYS R US	NYSE	200	40 125			8,025 00	Symbol. TOY\Rated B+
UNOCAL CORP	NYSE	200	31.875	2.196	140.00	6,375.00	Symbol: UCL\Rated B

Account number 685-06692-16 240

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ntinued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
WAL-MART STORES INC	NYSE	300	$ 47.25	.592%	$ 84.00	$ 14,175.00	Symbol WMT\Rated. A+
WARNER LAMBERT CO	NYSE	50	104.75	2.902	152 00	5,237.50	Symbol WLA\Rated A-
Total value of stocks					**$ 1,334.00**	**$ 77,993.75**	

onds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 8/26/83-CBLE	$ 100,000.00	0.00%	01/01/15	7.851		$ 7,851.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 7,851.00**	

ertificates deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest.

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000. Accreted value may be higher or lower than current market value.

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO.-MA FEDERALLY INSURED TO $100,000 6 MONTH CD	$ 2,500 00	8.20%	09/10/90	$ 102.21	$ 2,500 00	Accrued interest of $ 11 78 Int paid at maturity Mkt value figured at face amt
Total value of certificates of deposit				**$ 102.21**	**$ 2,500.00**	

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Account number 685-06692-16 240

Transaction details

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Date	Activity	Description	Quantity	Price	Amount
03/12/90	Investment	6 MONTH CERTIFICATE OF DEPOSIT 6MMCSHRC/D T/D INVESTMENT 08 20% DUE 09-10-90 BOSTON SAFE DEP & TRUST CO. T/D 03/07/90	2,500		$ -2,500.00
03/27/90	Bought	BROWNING-FERRIS INDUSTRIES INC	100	34.875	-3 545.64
Total securities bought and other subtractions					**$ -6,045.64**
Total securities sold and other additions					**$ 0.00**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

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Date	Description	Taxable	Non-taxable	Comment	Amount
03/21/90	INTEREST ON CREDIT BALANCE AT 7 845% 2/21 THRU 3/20	$ 15			$ .15
Total interest earned		**$ .15**	**$ 0.00**		**$ .15**

vidends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/28/90	CONTEL CORPORATION CASH DIV ON 200 SHS RECORD 02/16/90 PAY 02/28/90	$ 55.00			$ 55 00
03/06/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 02/20/90 PAY 03/06/90	29 00			29 00
03/09/90	BOEING CO CASH DIV ON 75 SHS RECORD 02/16/90 PAY 03/09/90	22.50			22.50
03/12/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 02/15/90 PAY 03/10/90	41.00			41.00

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ntinued

Date	Description	Taxable	Non-taxable	Comment	Amount
03/12/90	WARNER LAMBERT CO CASH DIV ON 50 SHS RECORD 02/09/90 PAY 03/10/90	$ 38.00			$ 38.00
03/22/90	PFIZER INC CASH DIV ON 100 SHS RECORD 02/09/90 PAY 03/22/90	60.00			60.00
Total dividends earned		**$ 245.50**	**$ 0.00**		**$ 245.50**

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arnings

Date	Description	Taxable	Non-taxable	Comment	Amount
03/09/90	SLH GOVERNMENT AND AGENCIES FUND	$ 12.99		Reinvested	$ 12.99
03/27/90	SLH GOVERNMENT AND AGENCIES FUND ACCRUED DIVIDEND	1.28		Credited to account	1.28
Total money funds earnings credited to account					**$ 1.28**
Total money funds earnings reinvested					**$ 12.99**
Total earnings from money funds		**$ 14.27**	**$ 0.00**		**$ 14.27**

Money funds details

All transactions are traded at $1.00 per share.

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ctivity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 2,493.98**
03/01/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	101.62	101.62
03/12/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	2,369.50	-2,369.50
03/27/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	239.09	-239.09
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	12.99	12.99
	Closing money funds balance			**$ 0.00**

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SHEARSON LEHMAN HUTTON

Client Statement

April 1 - April 29, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Money funds		$ 662 63
Stocks		78,615 63
Certificates of deposit		2,500 00
Net value this period		**$ 81,778.26**
Net value last period	**$ 85,099 63**	

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ 66	$ 1 03	$ 0 00
Dividends	38 50	370 00	0 00
Money funds earnings	0 00	45 92	0 00
Total	**$ 39 16**	**$ 416 95**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant.

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SHEARSON LEHMAN HUTTON

Client Statement
April 1 - April 29, 1990

NICK JOE RAHALL II ACF

Account number 685-06692-16 240

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ -3,245 12**
	Amounts added	Amounts subtracted	
Securities bought and other subtractions		-2,894 90	
Securities sold and other additions	6 780 00		
Withdrawals		-16 51	
Interest credited	66		
Dividends credited	38 50		
Total	$ 6,819 16	$ -2,911 41	
Combined closing cash and money funds balance			**$ 662 63**

Money funds 662.63

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 04/27/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	662 63	$ 662 63	7 477%	Accrued dividends of $ 1 81
Total value of money funds		**$ 662 63**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	75	$ 68.75	1 745%	$ 90 00	$ 5,156 25	Symbol BA\Rated. A-
BROWNING-FERRIS INDUSTRIES INC	NYSE	100	36 125	1 771	64 00	3,612 50	Symbol BFI\Rated: A+
BURLINGTON RES INC	NYSE	100	40 875	1 639	67 00	4,087 50	Symbol BR
COMTEL CORPORATION	NYSE	200	23 875	4 607	220 00	4,775 00	Symbol: CTC\Rated: A-
WALT DISNEY COMPANY	NYSE	25	109 625	529	14 50	2,740 63	Symbol DIS\Rated B+
JOHNSON & JOHNSON	NYSE	100	56 375	2 412	136 00	5,637 50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	65 625	2.499	164 00	6,562 50	Symbol: LLY\Rated:
MCI COMMUNICATIONS CORP	OTC	200	34 625			6,925 00	Sym
PFIZER INC	NYSE	100	57 75	4 155	240 00		

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Account number 685-06692-16 240

Stocks
continued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
TOYS R US	NYSE	200	$ 39.75			$ 7,950.00	Symbol TOY Rated B+
UNOCAL CORP	NYSE	200	28.[illegible]	2.50	140.00	[illegible]	Symbol [illegible] Rated B
WAL MART STORES INC	NYSE	300	48.375	.578	84.00	14,512.50	Symbol WMT Rated A+
WARNER LAMBERT CO	NYSE	50	105.625	2.878	152.00	5,281.25	Symbol WLA Rated A
Total value of stocks					$ 1,371.50	$ 78,615.63	

Certificates of deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000. Accreted value may be higher or lower than current market value

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO -MA FEDERALLY INSURED TO $100,000 6 MONTH CD	$ 2,500.00	8.20%	09/10/90	$ 102.21	$ 2,500.00	Accrued interest of $ 27.51 [illegible]
Total value of certificates of deposit				$ 102.21	$ 2,500.00	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
04/12/90	Bought	WALT DISNEY COMPANY	25	$ 113.75	$ [illegible]
04/12/90	Sold	WEST VIRGINIA HSG DEV FD SFMR 0-CPN TERM APPREC YTM 11.0% RG SER B-TICOR-DTD 9/28/83 CBLE DUE 01/01/2015 SETTLMENT 4-9-90 YIELD 11.184 010115 100.000 CALLABLE 01/01/93 AT 103.000 FIGURED TO S/D 04-09-90 AS OF 04/06/90	100,000	6.78	6,780.00
Total securities bought and other subtractions					$ 2,834.90
Total securities sold and other additions					$ 6,780.00

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SHEARSON LEHMAN HUTTON

Client Statement

Account number 685-06692-16 240

Withdrawals

Date	Description	Reference no	Amount
04/27/90	LATE PAYMENT FEE FOR 16 DAYS FROM 03/21 THRU 04/22 @ 11 50% AVERAGE BALANCE 3,230 24		$ 16 51

Earnings details

The tax status of earnings is reliable to the best of our knowledge *Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
04/23/90	INTEREST ON CREDIT BALANCE AT 7 824% 3/21 THRU 4/22	$ 66			$ 66
Total interest earned		**$ 66**	**$ 0 00**		**$ 66**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
04/02/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 03/16/90 PAY 04/02/90	$ 17 50			$ 17 50
04/09/90	WAL-MART STORES INC CASH DIV ON 300 SHS RECORD 03/23/90 PAY 04/09/90	21 00			21 00
Total dividends earned		**$ 38 50**	**$ 0 00**		**$ 38 50**

Money funds details

All transactions are traded at $1 00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 0 00
04/16/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	678 48	678 48
04/27/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	15 85	-15 85
	Closing money funds balance			$ 662 63

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Account number 585-06692-16 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 662.63
Securities bought and other subtractions		0.00	
Securities sold and other additions	5,649.66		
Deposits	16.51		
Interest credited	1.31		
Dividends credited	38.63		
Money funds earnings reinvested	17.47		
Total	$ 5,723.58	$ 0.00	
Combined closing cash and money funds balance			$ 6,386.21

Cash	39.94
Money funds	6,346.27

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/25/90.

Money funds

Description	No. of shares	Market value	Average (monthly) yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	6,346.27	$ 6,346.27	7.414%	Accrued dividends of $ 19.33
Total value of money funds		$ 6,346.27		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	75	$ 81.75	1.834%	$ 112.50	$ 6,131.25	Symbol: BA\Rated: A
BROWNING-FERRIS INDUSTRIES INC	NYSE	100	41.00	1.56	64.00	4,100.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	100	41.125	1.629	67.00	4,112.50	Symbol: BR
CONTEL CORPORATION	NYSE	200	28.00	3.928	220.00	5,600.00	Symbol: CTC\Rated: A
WALT DISNEY COMPANY	NYSE	25	117.625	.493	14.50	2,940.63	Symbol: DIS\Rated: B+
JOHNSON & JOHNSON	NYSE	100	62.625	2.171	136.00	6,262.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	75.50	2.172	164.00	7,550.00	Symbol: LLY\Rated: A+

3225

Account number 685-06692-16 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	200	$ 41 375	.12%	$ 10 00	$ 8,275 00	Symbol MCIC\Rated B
TOYS R US	NYSE	200	44.50			8,900 00	Symbol TOY\Rated B+
UNOCAL CORP	NYSE	200	29 25	2 393	140 00	5,850 00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	300	55 125	507	84 00	16,537 50	Symbol WMT\Rated A+
WARNER LAMBERT CO	NYSE	100	59 875	2 538	152 00	5,987 50	Symbol WLA\Rated A-
Total value of stocks					**$ 1,164 00**	**$ 82,246 88**	

Certificates of deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000. Accreted value may be higher or lower than current market value.

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO -MA FEDERALLY INSURED TO $100,000 6 MONTH CD	$ 2,500.00	8.20%	09/10/90	$ 102 21	$ 2,500 00	Accrued interest of $ 43 81 Int paid at maturity Mkt value figured at face amt
Total value of certificates of deposit				**$ 102 21**	**$ 2,500 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
04/30/90	Sold	PFIZER INC AVG PRICE SHOWN-DETAILS ON REQ	100	$ 57 219	$ 5,649 66
05/24/90	Stk split	WARNER LAMBERT CO STK SPLIT ON 50 SHS	50		0.00
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 5,649 66**

Deposits

Date	Description	Amount
04/30/90	LATE PAYMENT REVERSAL	$ 16 51

Earnings details

The tax status of earnings is reliable to the best of our knowledge **Taxable** *and* **non-taxable** *designations refer to the federal income tax status of your securities, not of your account*

Date	Description	Taxable	Non taxable	Comment	Amount
05/21/90	INTEREST ON CREDIT BALANCE AT 7 788% 4/23 THRU 5/20	$ 1 31			$ 1 31
Total interest earned		**$ 1 31**	**$ 0 00**		**$ 1 31**

Date	Description	Taxable	Non-taxable	Comment	Amount
05/10/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 04/10/90 PAY 05/10/90	$ 35 00			$ 35 00
05/15/90	WALT DISNEY COMPANY CASH DIV ON 25 SHS RECORD 04/13/90 PAY 05/15/90	3 63			3 63
Total dividends earned		**$ 38 63**	**$ 0 00**		**$ 38 63**

Date	Description	Taxable	Non-taxable	Comment	Amount
05/11/90	SLH GOVERNMENT AND AGENCIES FUND	$ 17 47		Reinvested	$ 17 47
Total earnings from money funds		**$ 17 47**	**$ 0 00**		**$ 17 47**

Money funds details

All transactions are traded at $1 00 per share

Date	Activity	Description	Quantity	Amount
		balance		**$ 662 63**
05/01/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	5,666 17	5,666 17
05/01/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	5,666 17	5,666 17

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Account number 685-06692-16 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
05/01/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	5,666 17	$ -5,666.17
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	17 47	17.47
		Closing money funds balance		**$ 6,346 27**

LEHMAN HUTTON

April 30 - May 27, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
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NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ 39.94
Money funds		6,346.27
Stocks		82,246.88
Certificates of deposit		2,500.00
Net value this period		**$ 91,133.09**
Net value last period	**$ 81,778.28**	

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ 1.31	$ 2.34	$ 0.00
Dividends	38.63	408.63	0.00
Money funds earnings	17.47	63.39	0.00
Total	**$ 57.41**	**$ 474.36**	[illegible]

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant

3229

SHEARSON LEHMAN HUTTON

An American Express company

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ 29 65
Money funds		6,628 57
Stocks		87,345 75
Certificates of deposit		2,500 00
Net value this period		**$ 86 503 97**
Net value last period	**$ 91,133 09**	

Earnings summary

	This period	This year
Interest	$ 40	$ 2 74
Dividends	206 13	614 76
Money funds earnings	36 23	99 62
Total	**$ 242 76**	**$ 717 12**

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 6,386 21**
	Amounts added	Amounts subtracted	
Securities bought and other subtractions		0 00	
Securities sold and other additions	29 25		
Interest credited	40		
Dividends credited	206 13		
Money funds earnings reinvested	36 23		
Total	$ 272 01	$ 0 00	
Combined closing cash and money funds balance			**$ 6,658 22**

Cash	29 65
Money funds	6,628 57

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SHEARSON LEHMAN HUTTON

An American Express Company

Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 06/29/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	6,628 57	$ 6,628 57	7.4[illegible]%	Accrued dividends of $ 28 05
Total value of money funds		**$ 6,628.57**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	112	$ 56 50	1.709%	$ 1[illegible]	$ [illegible]	Symbol BA Rated A
BROWNING FERRIS INDUSTRIES INC	NYSE	100	44 [illegible]	1 442	[illegible]	[illegible]	Symbol BF Rated A+
BURLINGTON RES INC	NYSE	100	41 875	1 60	[illegible]	4 187 50	Symbol BR
CONTEL CORPORATION	NYSE	200	25 75	4 2[illegible]	[illegible]	[illegible]	Symbol CTC Rated A
WALT DISNEY COMPANY	NYSE	25	128 25	4[illegible]	[illegible]	[illegible]	Symbol DIS Rated B+
JOHNSON & JOHNSON	NYSE	100	67 75	2 [illegible]	[illegible]	[illegible]	Symbol JNJ Rated A
ELI LILLY & CO	NYSE	100	83 125	1 97[illegible]	[illegible]	[illegible]	Symbol LLY Rated A+
MCI COMMUNICATIONS CORP	OTC	200	41 875	119	[illegible]	[illegible]	Symbol MCI Rated B
TOYS R US	NYSE	200	48 125			[illegible]	Symbol TOY Rated B+
UNOCAL CORP	NYSE	200	27 125	2 58	140 00	[illegible]	Symbol UCL Rated B
WAL-MART STORES INC	NYSE	300	62 375	448	84 00	18 712 50	Symbol WMT Rated A+
WARNER LAMBERT CO	NYSE	100	65 875	2 307	152 00	6 587 50	Symbol WLA Rated A
Total value of stocks					**$ 1,163 50**	**$ 87,345 75**	

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SHEARSON LEHMAN HUTTON

Account number 685-06692-16 240

ertificates f deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000 accreted value may be higher or lower than current market value

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO.-MA 6 MONTH CD	$ 2,500 00	8 20%	09/10/90	$ 102 21	$ 2,500 00	Accrued interest of $ 62 89 Int paid at maturity Mkt value figured at face amt
Total value of certificates of deposit				**$ 102 21**	**$ 2,500 00**	

Transaction details

ıvestment ctivity

Date	Activity	Description	Quantity	Price	Amount
06/18/90	Stk split	BOEING CO STK SPLIT ON 75 SHS	37		$ 0 00
06/18/90	Cashinlieu	BOEING CO CASH IN LIEU OF 50000 RECORD 05/18/90 PAY 06/08/90			29 25
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 29 25**

Earnings details

The tax status of earnings is reliable to the best of our knowledge ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account*

ıterest redited

Date	Description	Taxable	Non taxable	Comment	Amount
06/21/90	INTEREST ON CREDIT BALANCE AT 7 738% 5/21 THRU 6/20	$ 40			$ 40
Total interest earned		**$ 40**	**$ 0 00**		**$ 40**

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SHEARSON LEHMAN HUTTON

Account number 685-06692-16 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/31/90	CONTEL CORPORATION CASH DIV ON 200 SHS RECORD 05/15/90 PAY 05/31/90	$ 55.00			$ 55.00
06/05/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 05/22/90 PAY 06/05/90	34.00			34.00
06/08/90	BOEING CO CASH DIV ON 75 SHS RECORD 05/18/90 PAY 06/08/90	28.13			28.13
06/11/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 05/15/90 PAY 06/09/90	41.00			41.00
06/11/90	MCI COMMUNICATIONS CORP CASH DIV ON 200 SHS RECORD 05/21/90 PAY 06/11/90	10.00			10.00
06/15/90	WARNER LAMBERT CO CASH DIV ON 100 SHS RECORD 05/30/90 PAY 06/15/90	38.00			38.00
Total dividends earned		**$ 206.13**	**$ 0.00**		**$ 206.13**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
06/08/90	SLH GOVERNMENT AND AGENCIES FUND	$ 36.23		Reinvested	$ 36.23
Total earnings from money funds		**$ 36.23**	**$ 0.00**		**$ 36.23**

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 6,346.27**
06/06/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	128.94	128.94

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SHEARSON LEHMAN HUTTON

An American Express Company

Account number 685-06692-16 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
06/18/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	117.13	$ 117.13
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	36 23	36.23
		Closing money funds balance		**$ 6,628 57**

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SHEARSON LEHMAN HUTTON

July 1 - July 29, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421 3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
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AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ 84 57
Money funds		6,675 49
Stocks		88 086 00
Certificates of deposit		2 500 00
Net value this period		**$ 97,346.06**
Net value last period	$ 96,503 97	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 42	$ 3 16	$ 0 00
Dividends	54 50	669 26	0 00
Money funds earnings	46 92	146 54	0 00
Total	**$ 101 84**	**$ 818 96**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 6 658 22**
Securities bought and other subtractions		0 00	
Securities sold and other additions	0 00		
Interest credited	42		
Dividends credited	54 50		
Money funds earnings reinvested	46 92		
Total	$ 101 84	$ 0 00	
Combined closing cash and money funds balance			**$ 6,760 06**

Cash	84 57
Money funds	6,675 49

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/27/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	6,675 49	$ 6,675.49	7 377%	Accrued dividends of $ 18 72
Total value of money funds		**$ 6,675.49**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	112	$ 59 25	1.687%	$ 112.00	$ 6,636 00	Symbol: BA\Rated: A-
BROWNING FERRIS INDUSTRIES INC	NYSE	100	40.75	1 57	64.00	4,075 00	Symbol. BFI\Rated: A+
BURLINGTON RES INC	NYSE	100	44 375	1.577	70 00	4,437 50	Symbol BR
CONTEL CORPORATION	NYSE	200	33.125	3.32	220 00	6,625 00	Symbol: CTC\Rated: A-
WALT DISNEY COMPANY	NYSE	25	116 00	.50	14 50	2,900 00	Symbol: DIS\Rated: B+
JOHNSON & JOHNSON	NYSE	100	72 375	1 879	136 00	7,237 50	Symbol JNJ\Rated. A
ELI LILLY & CO	NYSE	100	80.50	2 037	164 00	8,050.00	Symbol LLY\Rated A+
MCI COMMUNICATIONS CORP	OTC	200	37 625	.132	10 00	7,525 00	Symbol. MCIC\Rated: B
TOYS R US	NYSE	300	29 375			8 812 50	Symbol TOY\Rated. B+
UNOCAL CORP	NYSE	200	30 375	2 304	140 00	6 075 00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	600	31 625	442	84 00	18,975 00	Symbol. WMT\Rated A+
WARNER LAMBERT CO	NYSE	100	67.375	2.256	152 00	6,737 50	Symbol WLA\Rated A-
Total value of stocks					**$ 1,166.50**	**$ 88,086 00**	

Certificates of deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest.

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000. Accreted value may be higher or lower than current market value.

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO.-MA 6 MONTH CD	$ 2,500 00	8 20%	09/10/90	$ 102.21	$ 2,500.00	Accrued interest of $ 78 62 Int paid at maturity Mkt value figured at face amt
Total value of certificates of deposit				**$ 102.21**	**$ 2,500 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/10/90	Stk split	TOYS R US STK SPLIT ON 200 SHS	100		$ 0.00
07/16/90	Stk split	WAL-MART STORES INC STK SPLIT ON 300 SHS	300		0 00
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 0 00**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
07/23/90	INTEREST ON CREDIT BALANCE AT 7 736% 6/21 THRU 7/22	$ 42			$ .42
Total interest earned		**$ .42**	**$ 0.00**		**$ .42**

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SHEARSON LEHMAN HUTTON

July 11 - July 29, 1990

NICK JOE RAHALL II ACCT

Account number 685-06692-16 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
07/02/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 06/15/90 PAY 07/02/90	$ 17.50			$ 17.50
07/06/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 100 SHS RECORD 06/22/90 PAY 07/06/90	16.00			16.00
07/06/90	WAL-MART STORES INC CASH DIV ON 300 SHS RECORD 06/15/90 PAY 07/06/90	21.00			21.00
Total dividends earned		**$ 54.50**	**$ 0.00**		**$ 54.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
07/13/90	SLH GOVERNMENT AND AGENCIES FUND	$ 46.92		Reinvested	$ 46.92
Total earnings from money funds		**$ 46.92**	**$ 0.00**		**$ 46.92**

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July 30 - August 31, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Money funds		$ 15,442 69
Stocks		72,537.50
Certificates of deposit		2,500 00
Net value this period		**$ 90,480.19**
Net value last period	**$ 97,346 08**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 3 30	$ 6 46	$ 0 00
Dividends	38 63	707.49	0.00
Money funds earnings	37 37	163 91	0.00
Total	**$ 79.30**	**$ 858 26**	**$ 0.00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 6 760 06
Securities bought and other subtractions		-5,765 10	
Securities sold and other additions	14,368 43		
Interest credited	3 30		
Dividends credited	38.63		
Money funds earnings reinvested	37 37		
Total	$ 14,447 73	$ -5,765 10	
Combined closing cash and money funds balance			$ 15,442 69

Money funds	15,442.69

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Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	15,442.69	$ 15,442.69	7.271%	Accrued dividends of $ 88 24
Total value of money funds		**$ 15,442.69**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	100	$ 60.875	3.482%	$ 212.00	$ 6,087.50	Symbol. BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	100	37 875	1 689	64.00	3,787.50	Symbol: BFI
BURLINGTON RES INC	NYSE	100	44.50	1.573	70 00	4,450.00	Symbol: BR
JOHNSON & JOHNSON	NYSE	100	65.625	2 072	136.00	6,562.50	Symbol: JNJ
ELI LILLY & CO	NYSE	100	75.125	2.183	164.00	7,512.50	Symbol: LLY
MCI COMMUNICATIONS CORP	OTC	200	34.00	.147	10.00	6,800 00	Symbol: MCIC
TOYS R US	NYSE	300	25.375			7,612.50	Symbol: TOY
UNOCAL CORP	NYSE	200	32.00	2.187	140 00	6,400.00	Symbol: UCL
WAL-MART STORES INC	NYSE	600	28.50	.491	84 00	17,100 00	Symbol: WMT
WARNER LAMBERT CO	NYSE	100	62.25	2.441	152 00	6,225.00	Symbol. WLA
Total value of stocks					**$ 1,032 00**	**$ 72,537.50**	

Certificates of deposit

Certificates of Deposit are federally insured to $100,000 combined principal and interest

Zero Coupon Certificates of Deposit are federally insured only to their accreted value up to $100,000. Accreted value may be higher or lower than current market value.

Description	Amount	Interest rate	Maturity date	Anticipated annual income	Market value	Comment
BOSTON SAFE DEP & TRUST CO.-MA 6 MONTH CD	$ 2,500.00	8.20%	09/10/90	$ 102.21	$ 2,500.00	Accrued interest of $ 96.60 Int paid at maturity Mkt value figured at face amt
Total value of certificates of deposit				**$ 102.21**	**$ 2,500.00**	

3240

Account number 685-06692-16 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
08/09/90	Sold	WALT DISNEY COMPANY	-25	$ 111 875	$ 2,746 13
08/13/90	Sold	BOEING CO AVG PRICE SHOWN-DETAILS ON REQ	-112	51 229	5 656 72
08/13/90	Sold	CONTEL CORPORATION AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 30 33483000	-200	30 334	5,965.58
08/31/90	Bought	BRISTOL MYERS SQUIBB CO AVG PRICE SHOWN-DETAILS ON REQ	100	56 93	-5,765 10
Total securities bought and other subtractions					**$ -5,765 10**
Total securities sold and other additions					**$ 14,368.43**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non taxable	Comment	Amount
08/21/90	INTEREST ON CREDIT BALANCE AT 7 408% 7/23 THRU 8/20	$ 3 30			$ 3 30
Total interest earned		**$ 3.30**	**$ 0 00**		**$ 3 30**

Dividends

Date	Description	Taxable	Non taxable	Comment	Amount
08/10/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 07/10/90 PAY 08/10/90	$ 35 00			$ 35 00
08/15/90	WALT DISNEY COMPANY CASH DIV ON 25 SHS RECORD 07/13/90 PAY 08/15/90	3.63			3 63
Total dividends earned		**$ 38.63**	**$ 0 00**		**$ 38 63**

3241

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
08/10/90	SLH GOVERNMENT AND AGENCIES FUND	$ 37.37		Reinvested	$ 37 37
Total earnings from money funds		**$ 37.37**	**$ 0.00**		**$ 37 37**

Money funds details

All transactions are traded at $1 00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 6,675 49**
08/10/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	2,830.70	2,830 70
08/14/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	11,657.30	11,657.30
08/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	11,657.30	11,657.30
08/14/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	11,657 30	-11,657 30
08/31/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	5,758.17	-5,758.17
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	37 37	37 37
	Closing money funds balance			**$ 15,442 69**

September 1 - September 30, 1990

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

Account value

Cash balance		$ 62
Money funds		18,288 70
Stocks		68,450 00
Net value this period		**$ 86,739.32**
Net value last period	**$ 80,480 19**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 102.84	$ 109 30	$ 0 00
Dividends	113 00	820 89	0 00
Money funds earnings	130 79	314 70	0 00
Total	$ 346 63	$ 1,244 89	$ 0 00

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 15,442 69**
Securities bought and other subtractions		0 00	
Securities sold and other additions	2,500 00		
Interest credited	102 84		
Dividends credited	113 00		
Money funds earnings reinvested	130 79		
Total	$ 2,846 63	$ 0 00	
Combined closing cash and money funds balance			**$ 18,289 32**

Cash	62
Money funds	18,288 70

Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 09/28/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	18,288.70	$ 18,288 70	7.244%	Accrued dividends of $ 50 74
Total value of money funds		**$ 18,288.70**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	100	$ 57 75	3.67%	$ 212 00	$ 5,775 00	Symbol: BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	100	30 75	2 081	64.00	3,075 00	Symbol. BFI
BURLINGTON RES INC	NYSE	100	44 75	1 564	70 00	4,475.00	Symbol: BR
JOHNSON & JOHNSON	NYSE	100	63 25	2 15	136 00	6,325 00	Symbol: JNJ
ELI LILLY & CO	NYSE	100	71.50	2.293	164 00	7,150 00	Symbol: LLY
MCI COMMUNICATIONS CORP	OTC	200	31 50	.158	10.00	6,300 00	Symbol: MCIC
TOYS R US	NYSE	300	23 25			6,975 00	Symbol TOY
UNOCAL CORP	NYSE	200	31.00	2.258	140 00	6,200 00	Symbol: UCL
WAL-MART STORES INC	NYSE	600	27 25	513	84 00	16,350 00	Symbol: WMT
WARNER LAMBERT CO	NYSE	100	58.25	2.609	152 00	5,825 00	Symbol. WLA
Total value of stocks					**$ 1,032.00**	**$ 68,450 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
09/10/90	Maturity	6 MONTH CERTIFICATE OF DEPOSIT BOSTON SAFE DEP & TRUST CO PROCEEDS AT MATURITY			$ 2,500 00
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 2,500 00**

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Account number 685-06692-16 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
09/10/90	6 MONTH CERTIFICATE OF DEPOSIT BOSTON SAFE DEP & TRUST CO. DUE 09/10/90 INTEREST PAID 182 DAYS INTEREST	$ 102.22			$ 102.22
09/21/90	INTEREST ON CREDIT BALANCE AT 7.451% 8/21 THRU 9/20	.62			62
Total interest earned		**$ 102.84**	**$ 0.00**		**$ 102.84**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
09/04/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 08/21/90 PAY 09/04/90	$ 34.00			$ 34.00
09/10/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 08/15/90 PAY 09/08/90	41.00			41.00
09/10/90	WARNER LAMBERT CO CASH DIV ON 100 SHS RECORD 08/03/90 PAY 09/10/90	38.00			38.00
Total dividends earned		**$ 113.00**	**$ 0.00**		**$ 113.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
09/14/90	SLH GOVERNMENT AND AGENCIES FUND	$ 130.79		Reinvested	$ 130.79
Total earnings from money funds		**$ 130.79**	**$ 0.00**		**$ 130.79**

3245

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 15,442 69**
09/11/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	2,715.22	2,715.22
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	130.79	130.79
	Closing money funds balance			**$ 18,288.70**

October 1 – October 26,

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
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AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ 55.33
Money funds		18,390.29
Stocks		67,975.00
Net value this period		**$ 86,420.62**
Net value last period	$ 88,739.32	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .21	$ 109.51	$ 0.00
Dividends	54.50	875.39	0.00
Money funds earnings	101.59	416.29	0.00
Total	$ 156.30	$ 1,401.19	$ [illegible]

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 18,289.32**
Interest credited	21		
Dividends credited	54.50		
Money funds earnings reinvested	101.59		
Total	$ 156.30	$ 0.00	
Combined closing cash and money funds balance			**$ 18,445.62**

Cash	55.33
Money funds	18,390.29

3247

Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/26/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	18,390.29	$ 18,390.29	7.214%	Accrued dividends of $ 50.50
Total value of money funds		**$ 18,390.29**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	100	$ 61.75	3.433%	$ 212.00	$ 6,175.00	Symbol: BMY\Rated: A+
BROWNING FERRIS INDUSTRIES INC	NYSE	100	28.00	2.285	64.00	2,800.00	Symbol: BFI\Rated. A+
BURLINGTON RES INC	NYSE	100	43.625	1.604	70.00	4,362.50	Symbol. BR
JOHNSON & JOHNSON	NYSE	100	66.125	2.056	136.00	6,612.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	73.00	2.246	164.00	7,300.00	Symbol: LLY\Rated. A+
MCI COMMUNICATIONS CORP	OTC	200	30.375	.329	20.00	6,075.00	Symbol. MCIC\Rated B
TOYS R US	NYSE	300	22.25			6,675.00	Symbol. TOY\Rated B+
UNOCAL CORP	NYSE	200	28.875	2.424	140.00	5,775.00	Symbol. UCL\Rated: B
WAL-MART STORES INC	NYSE	600	26.25	.533	84.00	15,750.00	Symbol: WMT\Rated. A+
WARNER LAMBERT CO	NYSE	100	64.50	2.356	152.00	6,450.00	Symbol. WLA\Rated: A-
Total value of stocks					**$ 1,042.00**	**$ 67,975.00**	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
10/22/90	INTEREST ON CREDIT BALANCE AT 7.234% 9/21 THRU 10/21	$ .21			$ .21
Total interest earned		**$ .21**	**$ 0.00**		**$ .21**

3248

Account number 685-06692-16 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
10/01/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 09/14/90 PAY 10/01/90	$ 17.50			$ 17.50
10/04/90	WAL-MART STORES INC CASH DIV ON 600 SHS RECORD 08/31/90 PAY 10/04/90	21.00			21.00
10/05/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 100 SHS RECORD 09/21/90 PAY 10/05/90	16.00			16.00
Total dividends earned		**$ 54.50**	**$ 0.00**		**$ 54.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
10/12/90	AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND	$ 101.59		Reinvested	$ 101.59
Total earnings from money funds		**$ 101.59**	**$ 0.00**		**$ 101.59**

October 29 - November 30, 1990

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Money funds		$ 17,490.15
Stocks		69 950 00
Net value this period		**$ 87,440.15**
Net value last period	**$ 86,420 62**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .21	$ 109.72	$ 0 00
Dividends	88 00	963 39	0 00
Money funds earnings	100 82	517.11	0 00
Total	**$ 189 03**	**$ 1,590 22**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 18,445 62**
Securities bought and other subtractions		-3,431 92	
Securities sold and other additions	2 287 42		
Interest credited	.21		
Dividends credited	88 00		
Money funds earnings reinvested	100.82		
Total	$ 2,476.45	$ -3,431.92	
Combined closing cash and money funds balance			**$ 17,490 15**

Money funds	17,490.15

3250

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 11/30/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	17,490.15	$ 17,490.15	7.061%	Accrued dividends of $ 73.10
Total value of money funds		**$ 17,490.15**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	100	$ 65.75	3.224%	$ 212.00	$ 6,575.00	Symbol: BMY\Rated: A+
BURLINGTON RES INC	NYSE	100	42.625	1.642	70.00	4,262.50	Symbol: BR
JOHNSON & JOHNSON	NYSE	100	69.75	1.949	136.00	6,975.00	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	73.75	2.223	164.00	7,375.00	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	19.875	.503	20.00	3,975.00	Symbol: MCIC\Rated: B
TOYS R US	NYSE	300	23.25			6,975.00	Symbol: TOY\Rated: B+
UNOCAL CORP	NYSE	200	28.625	2.445	140.00	5,725.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	600	30.125	.464	84.00	18,075.00	Symbol: WMT\Rated: A+
WARNER LAMBERT CO	NYSE	100	67.375	2.256	152.00	6,737.50	Symbol: WLA\Rated: A-
WASTE MANAGEMENT INC	NYSE	100	32.75	1.099	36.00	3,275.00	Symbol: WMX\Rated: A
Total value of stocks					**$ 1,014.00**	**$ 69,950.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
11/21/90	Sold	BROWNING FERRIS INDUSTRIES INC	-100	$ 23.375	$ 2,287.42
11/21/90	Bought	WASTE MANAGEMENT INC	100	33.75	-3,431.92
Total securities bought and other subtractions					**$ -3,431.92**
Total securities sold and other additions					**$ 2,287.42**

3251

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
11/21/90	INTEREST ON CREDIT BALANCE AT 7.107% 10/22 THRU 11/20	$ .21			$ .21
Total interest earned		**$ .21**	**$ 0.00**		**$ .21**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
11/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 100 SHS RECORD 10/05/90 PAY 11/01/90	$ 53.00			$ 53.00
11/09/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 10/10/90 PAY 11/09/90	35.00			35.00
Total dividends earned		**$ 88.00**	**$ 0.00**		**$ 88.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
11/09/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 100.82		Reinvested	$ 100.82
Total earnings from money funds		**$ 100.82**	**$ 0.00**		**$ 100.82**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 18,390.29**
11/02/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	108.33	108.33

3252

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
11/21/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	1,109 29	$ -1,109 29
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	100 82	100 82
	Closing money funds balance			**$ 17,490 15**

December 1 - December

SS # 232-06-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

Account value

Cash balance		$ .06
Money funds		13,591.50
Stocks		76,737.50
Net value this period		**$ 90,329.06**
Net value last period	**$ 87,440.15**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .06	$ 109.78	$ 0.00
Dividends	123.00	1,086.39	0.00
Money funds earnings	156.22	673.33	0.00
Total	**$ 279.28**	**$ 1,869.50**	**$ 0.00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 17,490.15**
Securities bought and other subtractions		-4,177.87	
Securities sold and other additions	0.00		
Interest credited	.06		
Dividends credited	123.00		
Money funds earnings reinvested	156.22		
Total	$ 279.28	$ -4,177.87	
Combined closing cash and money funds balance			**$ 13,591.56**

Cash	.06
Money funds	13,591.50

3254

Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/90

Money funds

Description	No. of shares	Market value	Average month y yie d	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	13,591.50	$ 13,591.50	6.836%	
Total value of money funds		**$ 13,591.50**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMGEN INC	OTC	50	$ 62 25			$ 3,112.50	Symbol: AMGN
BRISTOL MYERS SQUIBB CO	NYSE	100	67.00	3.582	240.00	6,700.00	Symbol BMY\Rated. A+
BURLINGTON RES INC	NYSE	100	38.00	1.842	70.00	3,800.00	Symbol BR
JOHNSON & JOHNSON	NYSE	100	71.75	1.895	136.00	7,175.00	Symbol JNJ\Rated A
ELI LILLY & CO	NYSE	100	73.25	2.73	200.00	7,325.00	Symbol LLY\Rated A+
MCI COMMUNICATIONS CORP	OTC	200	19.625	.509	20.00	3,925.00	Symbol MCIC\Rated B
TOYS R US	NYSE	300	22.50			6,750.00	Symbol TOY\Rated B+
TYCO LABORATORIES INC	NYSE	100	43.00	.837	36.00	4,300.00	Symbol TYC Rated A-
UNOCAL CORP	NYSE	200	26.25	2.666	140.00	5,250.00	Symbol UCL Rated B
WAL-MART STORES INC NEW	NYSE	600	30.25	.462	84.00	18,150.00	Symbol WMT\Rated A+
WARNER LAMBERT CO	NYSE	100	67.50	2.251	152.00	6,750.00	Symbol WLA\Rated A-
WASTE MANAGEMENT INC	NYSE	100	35.00	1.028	36.00	3,500.00	Symbol WMX\Rated A
Total value of stocks					**$ 1,114.00**	**$ 76,737.50**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/13/90	Bought	TYCO LABORATORIES INC AVG PRICE SHOWN-DETAILS ON REQ	100	$ 41.129	$ -4,177.87
Total securities bought and other subtractions					$ -4,177.87
Total securities sold and other additions					$ 0.00

3255

Other security activity

Date	Activity	Description	Quantity
12/21/90	Journal	AMGEN INC FROM 685-03355-01 TO 685-06692-01	50

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
12/21/90	INTEREST ON CREDIT BALANCE AT 6.970% 11/21 THRU 12/20	$ .06			$ .06
Total interest earned		**$ .06**	**$ 0.00**		**$ .06**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
12/04/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 11/20/90 PAY 12/04/90	$ 34.00			$ 34.00
12/10/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 11/15/90 PAY 12/08/90	41.00			41.00
12/10/90	MCI COMMUNICATIONS CORP CASH DIV ON 200 SHS RECORD 11/16/90 PAY 12/10/90	10 00			10.00
12/10/90	WARNER LAMBERT CO CASH DIV ON 100 SHS RECORD 11/02/90 PAY 12/10/90	38 00			38.00
Total dividends earned		**$ 123.00**	**$ 0.00**		**$ 123.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
12/14/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 117.66		Reinvested	$ 117.66
12/31/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	38.56		Reinvested	38.56
Total earnings from money funds		**$ 156.22**	**$ 0 00**		**$ 156 22**

Account number 685-06692-16 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 17,490.15
12/11/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	123.00	123.00
12/13/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	4,177.87	-4,177.87
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	156.22	156.22
	Closing money funds balance			$ 13,591.50

SHEARSON LEHMAN HUTTON

Preferred Client Statement

January 1 - January 28, 1990

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515

#1

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

Account value

Cash balance		$ .05
Money funds		14,436.44
Stocks		108,637.50
Bonds		14,610.00
Net value this period		**$ 137,683.99**
Net value last period	$ 151,835.79	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .05	$ .05	$ 0.00
Dividends	220.50	220.50	0.00
Money funds earnings	43.15	43.15	0.00
Total	**$ 263.70**	**$ 263.70**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 14,172.79**
Interest credited	.05		
Dividends credited	220.50		
Money funds earnings reinvested	43.15		
Total	$ 263.70	$ 0.00	
Combined closing cash and money funds balance			**$ 14,436.49**

Cash	.05
Money funds	14,436.44

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/26/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	14,436.44	$ 14,436.44	7.82%	Accrued dividends of $ 42.96
Total value of money funds		**$ 14,436.44**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 29.875	3.079%	$ 322.00	$ 10,456.25	Symbol: AXP\Rated: A-
BOEING CO	NYSE	150	57.875	2.073	180.00	8,681.25	Symbol: BA\Rated: B+
BURLINGTON RES INC	NYSE	100	41.75	1.532	64.00	4,175.00	Symbol: BR
CONTEL CORPORATION	NYSE	400	26.125	4.21	440.00	10,450.00	Symbol: CTC\Rated: A-
GENUINE PARTS CO	NYSE	100	38.25	3.137	120.00	3,825.00	Symbol: GPC\Rated: A+
JOHNSON & JOHNSON	NYSE	1[illegible]	52.875	2.1[illegible]3	110.00	5,287.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	61.875	2.65	164.00	6,187.50	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	35.125			7,025.00	Symbol: MCIC\Rated: B-
MERCK & CO INC	NYSE	300	72.00	2.50	540.00	21,600.00	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	43.375	.737	64.00	8,675.00	Symbol: TYC\Rated: A-

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Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UNOCAL CORP	NYSE	200	$ 27.125	2.58%	$ 140.00	$ 5,425.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	400	42.125	522	88.00	16,850.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,238.00**	**$ 108,637.50**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	7.305		$ 14,610.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 14,610.00**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
01/22/90	INTEREST ON CREDIT BALANCE AT 7.648% 12/29 THRU 1/21	$ .05			$ .05
Total interest earned		**$ .05**	**$ 0.00**		**$ .05**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/02/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 12/15/89 PAY 01/02/90	$ 17.50			$ 17.50
01/02/90	GENUINE PARTS CO CASH DIV ON 100 SHS RECORD 12/11/89 PAY 01/02/90	30.00			30.00
01/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 12/08/89 PAY 01/02/90	135.00			135.00

Account number 685-00725-10 240

Dividends
continued

Date	Description	Taxable	Non-taxable	Comment	Amount
01/02/90	TYCO LABORATORIES INC CASH DIV ON 200 SHS RECORD 12/05/89 PAY 01/02/90	$ 16.00			$ 16.00
01/02/90	WAL-MART STORES INC CASH DIV ON 400 SHS RECORD 12/11/89 PAY 01/02/90	22.00			22.00
	Total dividends earned	**$ 220.50**	**$ 0.00**		**$ 220.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/12/90	SLH DAILY DIVIDEND FUND	$ 43.15		Reinvested	$ 43.15
	Total earnings from money funds	**$ 43.15**	**$ 0.00**		**$ 43.15**

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 14,172.52
01/03/90	Autoinvest	SLH DAILY DIVIDEND FUND	220.77	220.77
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	43.15	43.15
	Closing money funds balance			$ 14,436.44

3261

SHEARSON LEHMAN HUTTON

Preferred Client Statement
January 29 - February 25, 1990

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

Preferred client service center: 1-800-232-4454

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance		$ .07
Money funds		7,737.02
Stocks		113,200.00
Bonds		15,702.00
Net value this period		**$ 136,639.09**
Net value last period	**$ 137,683.99**	

Earnings summary

		This year	
	This period	Taxable	Non-taxable
Interest	$ .07	$ .12	$ 0.00
Dividends	115.50	336.00	0.00
Money funds earnings	95.11	138.26	0.00
Total	**$ 210.68**	**$ 474.38**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

3262

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 14,436.49
Securities bought and other subtractions		-6,910.08	
Securities sold and other additions	0.00		
Interest credited	.07		
Dividends credited	115.50		
Money funds earnings credited	9.18		
Money funds earnings reinvested	85.93		
Total	$ 210.68	$ -6,910.08	
Combined closing cash and money funds balance			$ 7,737.09

Cash	.07
Money funds	7,737.02

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/23/90.

Money funds

Description	No. of shares	Market value	Annualized yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	7,737.02	$ 7,737.02	7.512%	Accrued dividends of $ 18.93
Total value of money funds		**$ 7,737.02**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 28.00	3.285	$ 392.00	$ 9,800.00	Symbol: AXP Rated: A
BOEING CO	NYSE	150	60.00	2.0[illegible]	[illegible]	9,000.00	Symbol: BA Rated: A
BURLINGTON RES INC	NYSE	100	42.50	1.50[illegible]	[illegible]	[illegible]	Symbol: BR
CHEVRON CORP	NYSE	100	66.875	4.186	[illegible]	[illegible]	Symbol: CHV Rated: B+
CONTEL CORPORATION	NYSE	400	26.125	4.21	440.00	10,450.00	Symbol: CTC Rated: A
GENUINE PARTS CO	NYSE	100	37.625	3.667	138.00	3,762.50	Symbol: GPC Rated: A+
JOHNSON & JOHNSON	NYSE	100	52.125	2.225	116.00	5,212.50	Symbol: JNJ Rated: A

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Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ELI LILLY & CO	NYSE	100	$ 59 125	2 773%	$ 164 00	$ 5,912 50	Symbol LLY\Rated: A +
MCI COMMUNICATIONS CORP	OTC	200	32 00			6,400 00	Symbol: MCIC\Rated B
MERCK & CO INC	NYSE	300	68 00	2 647	540 00	20,400 00	Symbol: MRK\Rated A +
TYCO LABORATORIES INC	NYSE	200	45 625	.701	64 00	9,125 00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	29 75	2 352	140 00	5,950 00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	400	40 625	.541	88 00	16,250 00	Symbol: WMT\Rated: A +
Total value of stocks					**$ 2,536 00**	**$ 113,200.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000 00	0 00%	01/01/15	7 851		$ 15,702 00	Callable on 01/01/93 Call price $ 103 00 Rated A1/A +
Total value of bonds					**$ 0 00**	**$ 15,702.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
02/15/90	Bought	CHEVRON CORP AVG PRICE SHOWN-DETAILS ON REQ	100	$ 68.379	$ -6,910 08
Total securities bought and other subtractions					**$ -6,910 08**
Total securities sold and other additions					**$ 0 00**

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Earnings details

The tax status of earnings is reliable to the best of our knowledge **Taxable** *and* **non-taxable** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/90	INTEREST ON CREDIT BALANCE AT 7.722% 1/22 THRU 2/20	$ .07			$ .07
Total interest earned		**$ .07**	**$ 0.00**		**$ .07**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	AMERICAN EXPRESS CO CASH DIV ON 350 SHS RECORD 01/05/90 PAY 02/09/90	$ 80.50			$ 80.50
02/09/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 01/10/90 PAY 02/09/90	35.00			35.00
Total dividends earned		**$ 115.50**	**$ 0.00**		**$ 115.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	SLH DAILY DIVIDEND FUND	$ 85.93		Reinvested	$ 85.93
02/14/90	SLH DAILY DIVIDEND FUND CASH DIV	9.18		Credited to account	9.18
Total money funds earnings credited to account					**$ 9.18**
Total money funds earnings reinvested					**$ 85.93**
Total earnings from money funds		**$ 85.11**	**$ 0.00**		**$ 95.11**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 14,436.44**
02/12/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	115.55	115.55
02/14/90	Redemption	SLH DAILY DIVIDEND FUND EXCHANGE REDEMPTION	14,522.37	-14,522.37

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Account number 685-00725-10 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
02/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	14,531.55	$ 14,531 55
02/15/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	6,910 08	-6,910 08
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	85.93	85 93
	Closing money funds balance			**$ 7,737.02**

Preferred Client Statement

February 26 - March 31, 1990

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

Account value

Money funds		$ 4,627.30
Stocks		124,237.50
Bonds		15,702.00
Net value this period		**$ 144,566.80**
Net value last period	$ 138,639.09	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .92	$ 1.04	$ 0.00
Dividends	225.00	561.00	0.00
Money funds earnings	49.07	187.33	0.00
Total	**$ 274.99**	**$ 749.37**	**$ 0.00**

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Preferred Client Statement
February 26 - March 31, 1990

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 7,737.09**
Securities bought and other subtractions		-7,086.03	
Securities sold and other additions	3,701.25		
Interest credited	92		
Dividends credited	225.00		
Money funds earnings reinvested	49.07		
Total	$ 3,976.24	$ -7,086.03	
Combined closing cash and money funds balance			**$ 4,627.30**

Money funds	4,627.30

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/30/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	4,627.30	$ 4,627.30	7.492%	Accrued dividends of $ 43.10
Total value of money funds		**$ 4,627.30**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 25.75	3.572%	$ 322.00	$ 9,012.50	Symbol: AXP\Rated: A-
BOEING CO	NYSE	150	71.75	1.672	180.00	10,762.50	Symbol: BA\Rated: A-
BROWNING-FERRIS INDUSTRIES INC	NYSE	200	36.50	1.753	128.00	7,300.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	100	39.625	1.615	64.00	3,962.50	Symbol: BR
CHEVRON CORP	NYSE	100	67.50	4.148	280.00	6,750.00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	400	28.50	3.859	440.00	11,400.00	Symbol: CTC\Rated: A-
JOHNSON & JOHNSON	NYSE	100	56.125	2.066	116.00	5,612.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	64.625	2.537	164.00	6,462.50	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	36.75			7,350.00	Symbol: MCIC\Rated: B

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Account number 685-00725-10 24

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MERCK & CO INC	NYSE	300	$ 69 50	2.589%	$ 540.00	$ 20,850.00	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	47.50	.673	64.00	9,500.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	31.875	2.196	140.00	6,375 00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	400	47 25	.592	112.00	18,900.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,550.00**	**$ 124,237.50**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TiCOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	7.851		$ 15,702.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 15,702.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
02/28/90	Sold	GENUINE PARTS CO	100	$ 37.625	$ 3,701.25
03/27/90	Bought	BROWNING-FERRIS INDUSTRIES INC	200	34.875	-7,086.03
Total securities bought and other subtractions					$ -7,086 03
Total securities sold and other additions					$ 3,701.25

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Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non taxable	Comment	Amount
03/21/90	INTEREST ON CREDIT BALANCE AT 7 845% 2/21 THRU 3/20	$ .92			$ .92
Total interest earned		**$ .92**	**$ 0.00**		**$ .92**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/28/90	CONTEL CORPORATION CASH DIV ON 400 SHS RECORD 02/16/90 PAY 02/28/90	$ 110 00			$ 110.00
03/06/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 02/20/90 PAY 03/06/90	29 00			29.00
03/09/90	BOEING CO CASH DIV ON 150 SHS RECORD 02/16/90 PAY 03/09/90	45.00			45.00
03/12/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 02/15/90 PAY 03/10/90	41.00			41.00
Total dividends earned		**$ 225 00**	**$ 0.00**		**$ 225.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
03/09/90	SLH GOVERNMENT AND AGENCIES FUND	$ 49 07		Reinvested	$ 49.07
Total earnings from money funds		**$ 49.07**	**$ 0.00**		**$ 49.07**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 7,737.02**
03/01/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	3,811.32	3,811.32

Account number 685 00725-10 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
03/13/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	115.00	$ 115.00
03/27/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	7,085.11	-7,085.11
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	49.07	49.07
	Closing money funds balance			**$ 4,627.30**

SHEARSON LEHMAN HUTTON

Preferred Client Statement
April 1 - April 29, 1990

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421 3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds		$ 385 86
Stocks		125,853.13
Bonds		15 986 00
Net value this period		**$ 142,224.99**
Net value last period	**$ 144,566 80**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 06	$ 1 10	$ 0 00
Dividends	196 50	757 50	0.00
Money funds earnings	56 80	244.13	0 00
Total	**$ 253 36**	**$ 1,002 73**	**$ 0 00**

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SHEARSON

Preferred Client Statement

April 1 - April 29, 1990

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 4,627 30
Securities bought and other subtractions		-8,603 35	
Securities sold and other additions	4,121 63		
Withdrawals		-13 08	
Interest credited	06		
Dividends credited	196 50		
Money funds earnings reinvested	56 80		
Total	$ 4 374 99	$ -8,616 43	
Combined closing cash and money funds balance			$ 385 86

Money funds 385 86

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 04/27/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	385 86	$ 385 86	7 477%	Accrued dividends of $ 0.24
Total value of money funds		$ 385 86		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 26 375	3 488%	$ 322 00	$ 9,231 25	Symbol AXP\Rated A-
BOEING CO	NYSE	150	68 75	1 745	180 00	10,312 50	Symbol BA\Rated A-
BROWNING-FERRIS INDUSTRIES INC	NYSE	200	36 125	1 771	128 00	7,225 00	Symbol BFI\Rated A+
CHEVRON CORP	NYSE	100	65 125	4 299	280 00	6,512 50	Symbol CHV\Rated B+
CONTEL CORPORATION	NYSE	400	23 875	4 607	440 00	9 550 00	Symbol CTC\Rated A-
WALT DISNEY COMPANY	NYSE	75	109 625	529	43 50	8 221 88	Symbol DIS\Rated B+
JOHNSON & JOHNSON	NYSE	100	56 375	2 412	136 00	5 637 50	Symbol JNJ\Rated A
ELI LILLY & CO	NYSE	100	65 625	2 499	164 00	6,562 50	Symbol LLY\Rated A+

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	200	$ 34 625			$ 6,925 00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	72 25	2 491	540 00	21 675 00	Symbol MRK\Rated. A+
TYCO LABORATORIES INC	NYSE	200	45 25	707	64 00	9,050 00	Symbol: TYC\Rated A-
UNOCAL CORP	NYSE	200	28 00	2 50	140 00	5 600 00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	400	48 375	578	112 00	19,350 00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,549.50**	**$ 125,853.13**	

Bonds

Some bond values provided by outside pricing services may be inaccurate They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200 000 00	0 00%	01/01/15	7 993		$ 15,986 00	Callable on 01/01/93 Call price $ 103 00 Rated A1/A+
Total value of bonds					**$ 0 00**	**$ 15,986 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
04/12/90	Bought	WALT DISNEY COMPANY	75	$ 113 75	$ -8,603 35
04/25/90	Sold	BURLINGTON RES INC	100	41 875	4,121 63
Total securities bought and other subtractions					**$ -8,603 35**
Total securities sold and other additions					**$ 4,121 63**

Withdrawals

Date	Description	Reference no	Amount
04/27/90	LATE PAYMENT FEE FOR 11 DAYS FROM 03/21 THRU 04/22 @ 11 50% AVERAGE BALANCE 3,722 75		**$ 13 08**

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SHEARSON LEHMAN HUTTON

Preferred Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
04/23/90	INTEREST ON CREDIT BALANCE AT 7.824% 3/21 THRU 4/22	$ .06			$ .06
Total interest earned		**$ .06**	**$ 0.00**		**$ .06**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
04/02/90	BURLINGTON RES INC CASH DIV ON 100 SHS RECORD 03/16/90 PAY 04/02/90	$ 17.50			$ 17.50
04/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 03/09/90 PAY 04/02/90	135.00			135.00
04/02/90	TYCO LABORATORIES INC CASH DIV ON 200 SHS RECORD 03/06/90 PAY 04/02/90	16.00			16.00
04/09/90	WAL-MART STORES INC CASH DIV ON 400 SHS RECORD 03/23/90 PAY 04/09/90	28.00			28.00
Total dividends earned		**$ 196.50**	**$ 0.00**		**$ 196.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
04/12/90	SLH GOVERNMENT AND AGENCIES FUND	$ 56.80		Reinvested	$ 56.80
Total earnings from money funds		**$ 56.80**	**$ 0.00**		**$ 56.80**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 4,627.30
04/03/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	168.50	168.50

Account number 685-00725-10 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
04/12/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	4,852 60	$ -4,852.60
04/26/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	398 94	398.94
04/27/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	13 08	-13.08
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	56.80	56.80
	Closing money funds balance			**$ 385.86**

LEHMAN HUTTON

April 30 - May 27, 1990

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515

SS # 233-17-4890
Your Financial Consultant

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717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

Account value

Cash balance		$ 11 04
Money funds		515.79
Stocks		142,378 13
Bonds		15,986 00
Net value this period		**$ 158,890.96**
Net value last period	**$ 142,224 99**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 16	$ 1 26	$ 0 00
Dividends	126 38	883 88	0 00
Money funds earnings	1 35	245 48	0 00
Total	$ 127 89	$ 1,130.62	$ 0 00

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant.

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Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 385 86**
	Amounts added	Amounts subtracted	
Deposits	13 08		
Interest credited	16		
Dividends credited	126 38		
Money funds earnings reinvested	1 35		
Total	$ 140 97	$ 0 00	
Combined closing cash and money funds balance			**$ 526 83**

Cash	11 04
Money funds	515 79

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 05/25/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	515 79	$ 515 79	7 414%	Accrued dividends of $ 1 54
Total value of money funds		**$ 515 79**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 29 375	3.131%	$ 322 00	$ 10,281.25	Symbol. AXP\Rated: A-
BOEING CO	NYSE	150	81 75	1.834	225 00	12,262 50	Symbol: BA\Rated: A-
BROWNING FERRIS INDUSTRIES INC	NYSE	200	41 00	1 56	128 00	8,200.00	Symbol. BFI\Rated: A+
CHEVRON CORP	NYSE	100	67 75	4.132	280 00	6,775.00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	400	28 00	3 928	440 00	11,200.00	Symbol: CTC\Rated: A-
WALT DISNEY COMPANY	NYSE	75	117 625	493	43 50	8,821.88	Symbol DIS\Rated: B+
JOHNSON & JOHNSON	NYSE	100	62 625	2.171	136 00	6,262.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	75 50	2.172	164.00	7,550 00	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	41 375	12	10 00	8,275.00	Symbol: MCIC\Rated: B

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Stocks *continued*

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
MERCK & CO INC	NYSE	300	$ 84.00	2.142%	$ 540.00	$ 25,200.00	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	48.25	.663	64.00	9,650.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	29.25	2.393	140.00	5,850.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	400	55.125	.507	112.00	22,050.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,604.50**	**$ 142,378.13**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV ED SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	7.993		$ 15,986.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 15,986.00**	

Deposits

Transaction details

Date	Description	Amount
04/30/90	LATE PAYMENT REVERSAL	$ 13.08

Interest credited

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Date	Description	Taxable	Non-taxable	Comment	Amount
05/21/90	INTEREST ON CREDIT BALANCE AT 7.788% 4/23 THRU 5/20	$ .16			$ .16
Total interest earned		**$ .16**	**$ 0.00**		**$ .16**

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Account number 685-00725-10 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/10/90	AMERICAN EXPRESS CO CASH DIV ON 350 SHS RECORD 04/06/90 PAY 05/10/90	$ 80.50			$ 80.50
05/10/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 04/10/90 PAY 05/10/90	35.00			35.00
05/15/90	WALT DISNEY COMPANY CASH DIV ON 75 SHS RECORD 04/13/90 PAY 05/15/90	10.88			10.88
Total dividends earned		**$ 126.38**	**$ 0.00**		**$ 126.38**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
05/11/90	SLH GOVERNMENT AND AGENCIES FUND	$ 1.35		Reinvested	$ 1.35
Total earnings from money funds		**$ 1.35**	**$ 0.00**		**$ 1.35**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 385.86**
05/11/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	128.58	128.58
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1.35	1.35
	Closing money funds balance			**$ 515.79**

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SHEARSON LEHMAN HUTTON

American Express company

Preferred Client Statement
May 29 - June 30, 1989

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center 1-800 232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance	$ 18
Money funds	851 17
Stocks	150 993 75
Bonds	16 022 00
Net value this period	**$ 167 867 10**
Net value last period	$ 158,890 96

Earnings summary

	This period	This year
Interest	$ 18	$ 1 44
Dividends	321 25	1,205 13
Money funds earnings	3 09	248 57
Total	**$ 324 52**	**$ 1 455 14**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 526 83
Securities bought and other subtractions		0 00	
Securities sold and other additions	0 00		
Interest credited	18		
Dividends credited	321 25		
Money funds earnings reinvested	3 09		
Total	$ 324 52	$ 0 00	
Combined closing cash and money funds balance			$ 851 35

Cash	18
Money funds	851 17

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SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 06/29/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	851 17	$ 851 17	7.409%	Accrued dividends of $ 3.52
Total value of money funds		**$ 851.17**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 30 75	2 991%	$ 322 00	$ 10,762 50	Symbol: AXP\Rated. A-
BOEING CO	NYSE	225	58 50	1 709	225 00	13,162.50	Symbol: BA\Rated: A-
BROWNING FERRIS INDUSTRIES INC	NYSE	200	44 375	1 442	128 00	8,875 00	Symbol: BFI\Rated: A+
CHEVRON CORP	NYSE	100	70 375	3 978	280 00	7,037.50	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	400	25 75	4 271	440 00	10 300 00	Symbol: CTC\Rated: A-
WALT DISNEY COMPANY	NYSE	75	128 25	452	43 50	9,618 75	Symbol: DIS\Rated: B+
JOHNSON & JOHNSON	NYSE	100	67 75	2.007	136 00	6.775 00	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	83 125	1 972	164 00	8,312.50	Symbol: LLY\Rated. A+
MCI COMMUNICATIONS CORP	OTC	200	41 875	119	10 00	8,375.00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	86 75	2 074	540.00	26,025.00	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	56 875	562	64.00	11,375.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	27 125	2 58	140 00	5,425 00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	400	62 375	.448	112 00	24,950.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,604.50**	**$ 150,993.75**	

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SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-00725-10 240

Bonds

Some bond values provided by outside pricing services may be inaccurate They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	8 011		$ 16,022 00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A +
Total value of bonds					**$ 0 00**	**$ 16,022 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
06/18/90	Stk split	BOEING CO STK SPLIT ON 150 SHS	75		$ 0 00
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 0 00

Earnings details

The tax status of earnings is reliable to the best of our knowledge ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
06/21/90	INTEREST ON CREDIT BALANCE AT 7 738% 5/21 THRU 6/20	$ 18			$ 18
Total interest earned		**$ .18**	**$ 0 00**		**$ 18**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/31/90	CONTEL CORPORATION CASH DIV ON 400 SHS RECORD 05/15/90 PAY 05/31/90	$ 110.00			$ 110 00
06/05/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 05/22/90 PAY 06/05/90	34 00			34 00

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SHEARSON LEHMAN HUTTON

An American Express company

Dividends
continued

Date	Description	Taxable	Non-taxable	Comment	Amount
06/08/90	BOEING CO CASH DIV ON 150 SHS RECORD 05/18/90 PAY 06/08/90	$ 56 25			$ 56 25
06/11/90	CHEVRON CORP CASH DIV ON 100 SHS RECORD 05/07/90 PAY 06/11/90	70 00			70.00
06/11/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 05/15/90 PAY 06/09/90	41.00			41 00
06/11/90	MCI COMMUNICATIONS CORP CASH DIV ON 200 SHS RECORD 05/21/90 PAY 06/11/90	10.00			10 00
Total dividends earned		**$ 321 25**	**$ 0.00**		**$ 321.25**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
06/08/90	SLH GOVERNMENT AND AGENCIES FUND	$ 3 09		Reinvested	$ 3 09
Total earnings from money funds		**$ 3 09**	**$ 0 00**		**$ 3 09**

Money funds details

All transactions are traded at $1 00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 515.79**
06/01/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	121.04	121 04
06/12/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	211.25	211 25
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	3 09	3 09
	Closing money funds balance			**$ 851 17**

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Preferred Client Statement

July 1 - July 29, 1990

Page 1

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to.

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

Preferred client service center: 1-800-232-4454

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance		$ 60 25
Money funds		1 008 61
Stocks		154 068 75
Bonds		16,114 00
Net value this period		**$ 171,251 61**
Net value last period	$ 167,867 10	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 25	$ 1 69	$ 0 00
Dividends	211 00	1 416 13	0 00
Money funds earnings	6 26	254 83	0 00
Total	**$ 217 51**	**$ 1,672 65**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 851 35**
Securities bought and other subtractions		0 00	
Securities sold and other additions	0 00		
Interest credited	25		
Dividends credited	211 00		
Money funds earnings reinvested	6 26		
Total	$ 217 51	$ 0 00	
Combined closing cash and money funds balance			**$ 1,068 86**

Cash	60 25
Money funds	1,008 61

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Preferred Client Statement

July 1 - July 29, 1990

N JOE RAHALL II ACF

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/27/90

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	1,008 61	$ 1,008 61	7 377%	Accrued dividends of $ 2 81
Total value of money funds		**$ 1,008.61**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 29 50	3 118%	$ 322 00	$ 10,325 00	Symbol. AXP\Rated: A-
BOEING CO	NYSE	225	59 25	1 687	225 00	13,331 25	Symbol: BA\Rated. A-
BROWNING FERRIS INDUSTRIES INC	NYSE	200	40 75	1 57	128 00	8,150 00	Symbol. BFI\Rated. A+
CHEVRON CORP	NYSE	100	77 25	4 012	310 00	7,725 00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	400	33 125	3 3[illegible]	440 00	13,250 00	Symbol: CTC\Rated A-
WALT DISNEY COMPANY	NYSE	75	116 00	50	43 50	8,700 00	Symbol: DIS\Rated. B+
JOHNSON & JOHNSON	NYSE	100	72 375	1 879	136 00	7,237 50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	80 50	2 037	164 00	8,050 00	Symbol. LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	37 625	132	10 00	7,525 00	Symbol MCIC\Rated B
MERCK & CO INC	NYSE	300	88 25	2 538	672 00	26,475.00	Symbol: MRK\Rated. A+
TYCO LABORATORIES INC	NYSE	200	59 625	536	[illegible]4 00	11,925 00	Symbol: TYC\Rated A-
UNOCAL CORP	NYSE	200	30 375	2 304	140 00	6,075 00	Symbol. UCL\Rated. B
WAL-MART STORES INC	NYSE	800	31 625	.442	112 00	25,300 00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 2,766 50**	**$ 154,068.75**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0 00%	01/01/15	8 057		$ 16,114 00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A +
Total value of bonds					**$ 0 00**	**$ 16,114 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07-16/90	Stk split	WAL MART STORES INC STK SPLIT ON 400 SHS	400		$ 0 00
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 0 00**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
07/23/90	INTEREST ON CREDIT BALANCE AT 7.736% 6/21 THRU 7/22	$ 25			$ 25
Total interest earned		**$ 25**	**$ 0 00**		**$ 25**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
07/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 06/04/90 PAY 07/02/90	$ 135.00			$ 135 00
07/02/90	TYCO LABORATORIES INC CASH DIV ON 200 SHS RECORD 06/05/90 PAY 07/02/90	16 00			16 00

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Dividends
continued

Date	Description	Taxable	Non-taxable	Comment	Amount
07/06/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 200 SHS RECORD 06/22/90 PAY 07/06/90	$ 32.00			$ 32.00
07/06/90	WAL-MART STORES INC CASH DIV ON 400 SHS RECORD 06/15/90 PAY 07/06/90	28.00			28.00
Total dividends earned		**$ 211.00**	**$ 0.00**		**$ 211.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
07/13/90	SLH GOVERNMENT AND AGENCIES FUND	$ 6.26		Reinvested	$ 6.26
Total earnings from money funds		**$ 6.26**	**$ 0.00**		**$ 6.26**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 851.17**
07/03/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	151.18	151.18
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	6.26	6.26
	Closing money funds balance			**$ 1,008.61**

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SHEARSON LEHMAN BROTHERS

Preferred Client Statement
July 30 - August 31, 1990

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421 3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds	$ 34,564 10
Stocks	107,243 75
Bonds	16,114 00
Net value this period	**$ 157 921 85**
Net value last period	**$ 171,251 61**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 8 35	$ 10 04	$ 0 00
Dividends	126 38	1 542 51	0 00
Money funds earnings	5 61	260 44	0 00
Total	**$ 140 34**	**$ 1 812 99**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 1,068 86**
Securities bought and other subtractions		-5,765 10	
Securities sold and other additions	39,120.00		
Interest credited	8 35		
Dividends credited	126 38		
Money funds earnings reinvested	5 61		
Total	$ 39,260 34	$ -5,765 10	
Combined closing cash and money funds balance			**$ 34,564 10**

Money funds	34,564 10

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Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	34,564 10	$ 34,564.10	7.271%	Accrued dividends of $ 161.29
Total value of money funds		**$ 34,564.10**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 24.125	3.81[illegible]%	$ 322 00	$ 8,443.75	Symbol: AXP
BRISTOL MYERS SQUIBB CO	NYSE	100	60 875	3 482	212 00	6,087.50	Symbol: BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	200	37 875	1.689	128 00	7,575.00	Symbol: BFI
JOHNSON & JOHNSON	NYSE	100	65 625	2 072	136.00	6,562 50	Symbol: JNJ
ELI LILLY & CO	NYSE	100	75 125	2 183	164.00	7,512.50	Symbol: LLY
MCI COMMUNICATIONS CORP	OTC	200	34 00	.147	10.00	6,800.00	Symbol: MCIC
MERCK & CO INC	NYSE	300	81.625	2.744	672.00	24,487.50	Symbol: MRK
TYCO LABORATORIES INC	NYSE	200	52.875	.605	64.00	10,575 00	Symbol: TYC
UNOCAL CORP	NYSE	200	32 00	2 187	140 00	6,400.00	Symbol: UCL
WAL-MART STORES INC	NYSE	800	28.50	491	112.00	22,800.00	Symbol: WMT
Total value of stocks					**$ 1,960.00**	**$ 107,243.75**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	8.057		$ 16,114.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 16,114.00**	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement
July 30 - August 31, 1990

N JOE RAHALL II ACF

Account number 685-00725-10 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
08/09/90	Sold	WALT DISNEY COMPANY	-75	$ 111 875	$ 8,318 25
08/13/90	Sold	BOEING CO AVG PRICE SHOWN-DETAILS ON REQ	-225	51 229	11,297 78
08/13/90	Sold	CONTEL CORPORATION AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 30.33483000	-400	30 334	11,952.21
08/15/90	Sold	CHEVRON CORP AVG PRICE SHOWN-DETAILS ON REQ	-100	76 241	7,551.76
08/31/90	Bought	BRISTOL MYERS SQUIBB CO AVG PRICE SHOWN-DETAILS ON REQ	100	56 93	-5,765 10
Total securities bought and other subtractions					$ -5,765 10
Total securities sold and other additions					$ 39,120 00

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
08/21/90	INTEREST ON CREDIT BALANCE AT 7 408% 7/23 THRU 8/20	$ 8.35			$ 8 35
Total interest earned		$ 8.35	$ 0.00		$ 8.35

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
08/10/90	AMERICAN EXPRESS CO CASH DIV ON 350 SHS RECORD 07/06/90 PAY 08/10/90	$ 80 50			$ 80 50
08/10/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 07/10/90 PAY 08/10/90	35 00			35 00
08/15/90	WALT DISNEY COMPANY CASH DIV ON 75 SHS RECORD 07/13/90 PAY 08/15/90	10.88			10 88
Total dividends earned		$ 126 38	$ 0 00		$ 126 38

Account number 685-00725-10 24

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
08/10/90	SLH GOVERNMENT AND AGENCIES FUND	$ 5 61		Reinvested	$ 5 61
Total earnings from money funds		**$ 5.61**	**$ 0.00**		**$ 5 61**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 1,008 61**
08/10/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	8,378 50	8,378.50
08/13/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	115.50	115.50
08/14/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	23,249 99	23,249 99
08/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	23,249.99	23,249 99
08/14/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	23,249.99	-23,249.99
08/16/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	7,562.64	7,562 64
08/16/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	7,562.64	7,562.64
08/16/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	7,562.64	-7,562.64
08/31/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	5,756.75	-5,756.75
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	5.61	5.61
	Closing money funds balance			**$ 34,564 10**

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September 1 - Septem

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
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Account number 685-00725-10 240
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AL COSENZA

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance		$ 09
Money funds		34,967.29
Stocks		99,906 25
Bonds		16,060 00
Net value this period		**$ 150,933.63**
Net value last period	**$ 157,921 85**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 09	$ 10 13	$ 0 00
Dividends	152 50	1,695.01	0 00
Money funds earnings	250 69	511 13	0 00
Total	**$ 403 28**	**$ 2,216 27**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 34,564 10**
Interest credited	09		
Dividends credited	152.50		
Money funds earnings reinvested	250 69		
Total	$ 403 28	$ 0 00	
Combined closing cash and money funds balance			**$ 34,967 38**

Cash	09
Money funds	34,967 29

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 09/28/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	34,967 29	$ 34,967 29	7 244%	Accrued dividends of $ 97 03
Total value of money funds		**$ 34,967.29**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 21 125	4 355%	$ 322 00	$ 7,393 75	Symbol. AXP
BRISTOL MYERS SQUIBB CO	NYSE	100	57.75	3 67	212 00	5,775 00	Symbol BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	200	30.75	2 081	128.00	6,150 00	Symbol: BFI
JOHNSON & JOHNSON	NYSE	100	63.25	2.15	136 00	6,325 00	Symbol: JNJ
ELI LILLY & CO	NYSE	100	71.50	2.293	164 00	7,150 00	Symbol: LLY
MCI COMMUNICATIONS CORP	OTC	200	31 50	.158	10 00	6,300 00	Symbol MCIC
MERCK & CO INC	NYSE	300	76 125	2 942	672.00	22,837 50	Symbol. MRK
TYCO LABORATORIES INC	NYSE	200	49 875	641	64 00	9,975 00	Symbol TYC
UNOCAL CORP	NYSE	200	31 00	2.258	140 00	6,200 00	Symbol. UCL
WAL-MART STORES INC	NYSE	800	27.25	513	112 00	21,800 00	Symbol. WMT
Total value of stocks					**$ 1,960 00**	**$ 99,906.25**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0 00%	01/01/15	8.03		$ 16,060.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0 00**	**$ 16,060.00**	

3294

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
09/21/90	INTEREST ON CREDIT BALANCE AT 7.451% 8/21 THRU 9/20	$ .09			$ .09
Total interest earned		**$ .09**	**$ 0.00**		**$ .09**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
09/04/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 08/21/90 PAY 09/04/90	$ 34.00			$ 34.00
09/10/90	CHEVRON CORP CASH DIV ON 100 SHS RECORD 08/06/90 PAY 09/10/90	77.50			77.50
09/10/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 08/15/90 PAY 09/08/90	41.00			41.00
Total dividends earned		**$ 152.50**	**$ 0.00**		**$ 152.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
09/14/90	SLH GOVERNMENT AND AGENCIES FUND	$ 250.69		Reinvested	$ 250.69
Total earnings from money funds		**$ 250.69**	**$ 0.00**		**$ 250.69**

Account number 685-00725-10 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 34,564 10**
09/11/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	152.50	152.50
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	250.69	250.69
	Closing money funds balance			**$ 34,967.29**

October 1 - October 28, 1990

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance	$ 60 25
Money funds	35,346.07
Stocks	97,868 75
Bonds	16,060 00
Net value this period	**$ 149,335.07**
Net value last period	**$ 150,933 63**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 25	$ 10 38	$ 0 00
Dividends	244 00	1,939 01	0 00
Money funds earnings	194 69	705 82	0 00
Total	$ 438 94	$ 2,655 21	$ 0 00

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 34 967 38
Interest credited	25		
Dividends credited	244 00		
Money funds earnings reinvested	194 69		
Total	$ 438.94	$ 0 00	
Combined closing cash and money funds balance			$ 35,406 32

Cash	60 25
Money funds	35,346.07

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/26/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	35,346.07	$ 35,346.07	7.214%	Accrued dividends of $ 97.09
Total value of money funds		**$ 35,346.07**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 18.625	4.939%	$ 322.00	$ 6,518.75	Symbol: AXP\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	100	61.75	3.433	212.00	6,175.00	Symbol: BMY\Rated: A+
BROWNING FERRIS INDUSTRIES INC	NYSE	200	28.00	2.285	128.00	5,600.00	Symbol: BFI\Rated: A+
JOHNSON & JOHNSON	NYSE	100	66.125	2.056	136.00	6,612.50	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	73.00	2.246	164.00	7,300.00	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	30.375	.329	20.00	6,075.00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	79.125	2.83	672.00	23,737.50	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	45.375	.793	72.00	9,075.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	28.875	2.424	140.00	5,775.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	800	26.25	.533	112.00	21,000.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 1,978.00**	**$ 97,868.75**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	8.03		$ 16,060.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 16,060.00**	

3298

Account number 685-00725-10 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

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Date	Description	Taxable	Non-taxable	Comment	Amount
10/22/90	INTEREST ON CREDIT BALANCE AT 7.234% 9/21 THRU 10/21	$ .25			$ .25
Total interest earned		**$ .25**	**$ 0.00**		**$ .25**

)ividends

Date	Description	Taxable	Non-taxable	Comment	Amount
10/01/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 09/04/90 PAY 10/01/90	$ 168.00			$ 168.00
10/01/90	TYCO LABORATORIES INC CASH DIV ON 200 SHS RECORD 09/04/90 PAY 10/01/90	16.00			16.00
10/04/90	WAL-MART STORES INC CASH DIV ON 800 SHS RECORD 08/31/90 PAY 10/04/90	28.00			28.00
10/05/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 200 SHS RECORD 09/21/90 PAY 10/05/90	32.00			32.00
Total dividends earned		**$ 244.00**	**$ 0.00**		**$ 244.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
10/12/90	AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND	$ 194.69		Reinvested	$ 194.69
Total earnings from money funds		**$ 194.69**	**$ 0.00**		**$ 194.69**

Account number 685-00725-10 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 34,967.29**
10/02/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	184.09	184.09
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	194.69	194.69
	Closing money funds balance			**$ 35,346.07**

3300

SS # 233-17-4890
Your Financial Consultant

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Preferred client service center 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T ROLFE
AL COSENZA

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NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds	$ 33,498.82
Stocks	102,250.00
Bonds	16,112.00
Net value this period	**$ 151,860.82**
Net value last period	**$ 149,335.07**

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ 21	$ 10.59	$ 0.00
Dividends	168.50	2,107.51	0.00
Money funds earnings	193.61	899.43	0.00
Total	**$ 362.32**	**$ 3,017.53**	**$ 0.00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 35,496.32
Securities bought and other subtractions		-6,858.59	
Securities sold and other additions	4,588.77		
Interest credited	21		
Dividends credited	168.50		
Money funds earnings reinvested	193.61		
Total	$ 4,951.09	$ -6,858.59	
Combined closing cash and money funds balance			$ 33,498.82

Money funds	33,498.82

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 11/30/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	33,498.82	$ 33,498 82	7.061%	Accrued dividends of $ 140 28
Total value of money funds		**$ 33,498.82**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 20 50	4.487%	$ 322 00	$ 7,175 00	Symbol. AXP\Rated A-
BRISTOL MYERS SQUIBB CO	NYSE	100	65.75	3 224	212 00	6,575 00	Symbol: BMY\Rated A+
JOHNSON & JOHNSON	NYSE	100	69 75	1 949	136 00	6,975 00	Symbol: JNJ\Rated A
ELI LILLY & CO	NYSE	100	73.75	2 223	164 00	7,375 00	Symbol: LLY\Rated A+
MCI COMMUNICATIONS CORP	OTC	200	19 875	503	20 00	3 975 00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	86 25	2 597	672 00	25,875 00	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	39 625	.908	72 00	7,925 00	Symbol: TYC\Rated A-
UNOCAL CORP	NYSE	200	28.625	2.445	140 00	5,725 00	Symbol: UCL\Rated B
WAL-MART STORES INC	NYSE	800	30 125	464	112 00	24,100 00	Symbol WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	32 75	1 009	72 00	6 550 00	Symbol: WMX\Rated A
Total value of stocks					**$ 1,922.00**	**$ 102,250.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000 00	0.00%	01/01/15	8.056		$ 16,112.00	Callable on 01/01/93 Call price $ 103 00 Rated A1/A+
Total value of bonds					**$ 0.00**	**$ 16,112 00**	

3302

Account number 685-00725-10 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
11/21/90	Sold	BROWNING FERRIS INDUSTRIES INC	-200	$ 23.375	$ 4,588 77
11/21/90	Bought	WASTE MANAGEMENT INC	200	33 75	-6 858 59
Total securities bought and other subtractions					**$ -6,858 59**
Total securities sold and other additions					**$ 4,588 77**

Earnings details

The tax status of earnings is reliable to the best of our knowledge ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
11/21/90	INTEREST ON CREDIT BALANCE AT 7 107% 10/22 THRU 11/20	$ 21			$ .21
Total interest earned		**$ 21**	**$ 0 00**		**$ 21**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
11/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 100 SHS RECORD 10/05/90 PAY 11/01/90	$ 53 00			$ 53 00
11/09/90	AMERICAN EXPRESS CO CASH DIV ON 350 SHS RECORD 10/05/90 PAY 11/09/90	80 50			80 50
11/09/90	UNOCAL CORP CASH DIV ON 200 SHS RECORD 10/10/90 PAY 11/09/90	35 00			35 00
Total dividends earned		**$ 168.50**	**$ 0.00**		**$ 168 50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
11/09/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 193 61		Reinvested	$ 193 61
Total earnings from money funds		**$ 193 61**	**$ 0 00**		**$ 193 61**

3303

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 35,346 07**
11/02/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	113.25	113.25
11/12/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	115.50	115 50
11/21/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	2,269.61	-2,269.61
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	193 61	193.61
	Closing money funds balance			**$ 33,498.82**

Preferred client statement
December 1 - December 31, 1990

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to

JAMES T SHEPHERD
GERALD T. ROLFE
AL COSENZA

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NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Cash balance		$ .06
Money funds		24,925.06
Stocks		113,093 75
Bonds		16,112.00
Net value this period		**$ 154,130.87**
Net value last period	**$ 151,860.82**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 06	$ 10 65	$ 0 00
Dividends	85.00	2,192 51	0 00
Money funds earnings	292 23	1,191 66	0.00
Total	**$ 377.29**	**$ 3,394 82**	**$ 0 00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 33,498 82**
Securities bought and other subtractions		-8,950 99	
Securities sold and other additions	0.00		
Interest credited	.06		
Dividends credited	85.00		
Money funds earnings reinvested	292.23		
Total	$ 377.29	$ -8,950 99	
Combined closing cash and money funds balance			**$ 24,925 12**

Cash	.06
Money funds	24,925 06

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	24,925.06	$ 24,925.06	6.636%	
Total value of money funds		**$ 24,925.06**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN EXPRESS CO	NYSE	350	$ 20.625	4.46%	$ 322.00	$ 7,218.75	Symbol: AXP\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	100	67.00	3.582	240.00	6,700.00	Symbol: BMY\Rated: A+
JOHNSON & JOHNSON	NYSE	100	71.75	1.895	136.00	7,175.00	Symbol: JNJ\Rated: A
ELI LILLY & CO	NYSE	100	73.25	2.73	200.00	7,325.00	Symbol: LLY\Rated: A+
MCI COMMUNICATIONS CORP	OTC	200	19.625	.509	20.00	3,925.00	Symbol: MCIC\Rated: B
MCDONALDS CORP	NYSE	300	29.125	1.167	102.00	8,737.50	Symbol: MCD\Rated: A+
MERCK & CO INC	NYSE	300	89.875	2.492	672.00	26,962.50	Symbol: MRK\Rated: A+
TYCO LABORATORIES INC	NYSE	200	43.00	.837	72.00	8,600.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	200	26.25	2.666	140.00	5,250.00	Symbol: UCL\Rated: B
WAL-MART STORES INC NEW	NYSE	800	30.25	.462	112.00	24,200.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	35.00	1.028	72.00	7,000.00	Symbol: WMX\Rated: A
Total value of stocks					**$ 2,088.00**	**$ 113,093.75**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated Income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 200,000.00	0.00%	01/01/15	8.056		$ 16,112.00	Callable on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	**$ 200,000.00**				**$ 0.00**	**$ 16,112.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/11/90	Bought	MCDONALDS CORP	300	$ 29.375	$ -8,950.99
Total securities bought and other subtractions					**$ -8,950.99**
Total securities sold and other additions					**$ 0.00**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
12/21/90	INTEREST ON CREDIT BALANCE AT 6.970% 11/21 THRU 12/20	$ .06			$ .06
Total interest earned		**$ .06**	**$ 0.00**		**$ .06**

3807

Account number 685-00725-10 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
12/04/90	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 11/20/90 PAY 12/04/90	$ 34.00			$ 34.00
12/10/90	ELI LILLY & CO CASH DIV ON 100 SHS RECORD 11/15/90 PAY 12/08/90	41.00			41.00
12/10/90	MCI COMMUNICATIONS CORP CASH DIV ON 200 SHS RECORD 11/16/90 PAY 12/10/90	10.00			10.00
Total dividends earned		**$ 85.00**	**$ 0.00**		**$ 85.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
12/14/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 221.51		Reinvested	$ 221.51
12/31/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	70.72		Reinvested	70.72
Total earnings from money funds		**$ 292.23**	**$ 0.00**		**$ 292.23**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 33,498.82**
12/11/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	8,865.99	-8,865.99
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	292.23	292.23
	Closing money funds balance			**$ 24,925.06**

SHEARSON LEHMAN HUTTON

Preferred Client Statement

January 1 - January 28, 1990

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 20515

#1

SS # 233-25-9977
Your Financial Consultant

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717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to

N JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks		$ 14,050.00
Bonds		4,244.20
Income account balance		1.01
Net value this period		**$ 18,295.21**
Net value last period	$ 21,926.81	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

3309

SHEARSON LEHMAN HUTTON

Preferred Client Statement
January 1 - January 28, 1990

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Cash balance

Opening cash balance			$ 1.01
	Amounts added	Amounts subtracted	
Total	$ 0.00	$ 0.00	
Closing cash balance			$ 1.01

Income account balance	1.01

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/26/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	400	$ 35.125			$ 14,050.00	Symbol: MCIC\Rated: B-
Total value of stocks					$ 0.00	$ 14,050.00	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	42.442		$ 4,244.20	Callable on 06/01/99 Call price $ 83.08 Rated AAA/AAA
Total value of bonds					$ 0.00	$ 4,244.20	

3310

SHEARSON LEHMAN HUTTON

Preferred Client Statement
January 29 - February 25, 1990

SS # 233-25-9977
Your Financial Consultant

JAMES A JOSEPH
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Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to:

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JAMES T SHEPHERD

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Stocks		$ 12,800 00
Bonds		4,191 80
Income account balance		1.02
Net value this period		**$ 16,992 82**
Net value last period	$ 18,295 21	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 01	$ 01	$ 0 00
Total	**$ .01**	**$ .01**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ 1.01**
Interest credited	01		
Total	$ .01	$ 0 00	
Closing cash balance			**$ 1 02**

Income account balance 1 02

3311

Account number 685-08740-14 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 02/23/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	400	$ 32.00			$ 12,800.00	Symbol: MCIC\Rated: B
Total value of stocks					**$ 0.00**	**$ 12,800.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	41.918		$ 4,191.80	Callable on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds					**$ 0.00**	**$ 4,191.80**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7.222% 1/22 THRU 2/20	$ .01			$ .01
Total interest earned		**$ .01**	**$ 0.00**		**$ .01**

3312

LEHMAN HUTTON

February 26 - March 31, 1990

SS # 233-25-9977
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Stocks	$ 14,700.00
Bonds	4,241.50
Income account balance	1.03
Net value this period	$ 18,942.53
Net value last period	$ 16,992.82

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .01	$ .02	$ 0.00
Total	$ .01	$ .02	$ 0.00

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 1.02
Interest credited	.01		
Total	$ .01	$ 0.00	
Closing cash balance			$ 1.03

Income account balance	1.03

3313

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/30/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	400	$ 36.75			$ 14,700.00	Symbol: MCIC\Rated: B
Total value of stocks					**$ 0.00**	**$ 14,700.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	42.415		$ 4,241.50	Callable on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds					**$ 0.00**	**$ 4,241.50**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
03/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7.345% 2/21 THRU 3/20	$ .01			$ .01
Total interest earned		**$ .01**	**$ 0.00**		**$ .01**

SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-08740-14 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
06/11/90	MCI COMMUNICATIONS CORP CASH DIV ON 400 SHS RECORD 05/21/90 PAY 06/11/90	$ 20.00			$ 20.00
Total dividends earned		**$ 20.00**	**$ 0.00**		**$ 20.00**

SHEARSON LEHMAN HUTTON

An American Express company

Preferred Client [illegible]

SS # 233-25-9977
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Stocks		$ 16,750 00
Bonds		4,274 70
Income account balance		21 10
Net value this period		**$ 21,045 80**
Net value last period	**$ 18,042 53**	

Earnings summary

	This period	This year
Interest	$ 07	$ 09
Dividends	20 00	20 00
Total	**$ 20 07**	**$ 20 09**

Cash balance

Opening cash balance			**$ 1.03**
	Amounts added	Amounts subtracted	
Interest credited	07		
Dividends credited	20 00		
Total	$ 20 07	$ 0 00	
Closing cash balance			**$ 21 10**

Income account balance	21 10

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SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-08740-14 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 06/29/90

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	400	$ 41 875	119%	$ 20 00	$ 16,750 00	Symbol. MCIC\Rated: B
Total value of stocks					**$ 20 00**	**$ 16,750 00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate They are provided only as a guide to determining portfolio value For more specific values, please call your Financial Consultant

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY 0 CPN C/A 7 30%-AMBAC DTD 5/4/89	$ 10,000 00	0 00%	06/01/02	42 747		$ 4,274 70	Callable on 06/01/99 Call price $ 83 06 Rated AAA/AAA
Total value of bonds					**$ 0 00**	**$ 4,274 70**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
04/23/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7.324% 3/21 THRU 4/22	$ 01			$ 01
05/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7 288% 4/23 THRU 5/20	01			01
06/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7 238% 5/21 THRU 6/20	05			05
Total interest earned		**$ 07**	**$ 0 00**		**$ 07**

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Account number 685-08740-14 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/28/90.

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
MCI COMMUNICATIONS CORP	OTC	400	$ 31.50	.158%	$ 20.00	$ 12,600.00	Symbol: MCIC
Total value of stocks					**$ 20.00**	**$ 12,600.00**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated annual income	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	42.908		$ 4,290.80	Callable on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds					**$ 0.00**	**$ 4,290.80**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
07/23/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 7.236% 6/21 THRU 7/22	$ .14			$ .14
08/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.908% 7/23 THRU 8/20	.12			.12
09/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.951% 8/21 THRU 9/20	.13			.13
Total interest earned		**$ .39**	**$ 0.00**		**$ .39**

July 1 - September 30, 1990

SS # 233-25-9977
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421 3100

Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to

N JOE RAHALL
JAMES T SHEPHERD

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Stocks		$ 12,600 00
Bonds		4,290 80
Income account balance		21 49
Net value this period		**$ 16,912 29**
Net value last period	**$ 21 045 80**	

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ 39	$ 48	$ 0 00
Dividends	0 00	20 00	0 00
Total	$ 39	$ 20 48	$ 0 00

NOW YOU CAN RECEIVE ALL YOUR SHEARSON LEHMAN BROTHERS ACCOUNT STATEMENTS IN ONE ENVELOPE WHENEVER POSSIBLE.

Beginning next month, we will be able to consolidate your account statements in one envelope. Please read this month's enclosed newsletter for more information. If you do not want to take advantage of this new service, please contact your Financial Consultant within 30 days.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ 21 10**
Interest credited	39		
Total	$ 39	$ 0 00	
Closing cash balance			**$ 21 49**

Income account balance	21 49

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October - December

SS # 233-25-9977
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08740-14 240
As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Stocks		$ 10,962 50
Bonds		4,609.40
Income account balance		41 96
Net value this period		**$ 15,613.86**
Net value last period	**$ 16,912.29**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .47	$ 95	$ 0 00
Dividends	20.00	40 00	0 00
Total	**$ 20.47**	**$ 40.95**	**$ 0 00**

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ 21.49**
Interest credited	.47		
Dividends credited	20 00		
Total	$ 20.47	$ 0.00	
Closing cash balance			**$ 41.96**

Income account balance	41.96

3320

Account number 685-08740-14 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/90.

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMGEN INC	OTC	50	$ 62.25			$ 3,112.50	Symbol: AMGN
MCI COMMUNICATIONS CORP	OTC	400	19.625	.509	40.00	7,850.00	Symbol: MCIC\Rated: B
Total value of stocks					**$ 40.00**	**$ 10,962.50**	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7 30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	46.094		$ 4,609.40	Callable on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds	**$ 10,000.00**				**$ 0.00**	**$ 4,609.40**	

Transaction details

Other security activity

Date	Activity	Description	Quantity
12/21/90	Journal	AMGEN INC FROM 685-03355-01 TO 685-08740-01	50

3321

Account number 685-08740-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
10/22/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.734% 9/21 THRU 10/21	$ .12			$ .12
11/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.607% 10/22 THRU 11/20	.12			.12
12/21/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.470% 11/21 THRU 12/20	.16			.16
12/31/90	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 6.020% 12/21 THRU 12/30	.07			.07
Total interest earned		**$ .47**	**$ 0.00**		**$ .47**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
12/10/90	MCI COMMUNICATIONS CORP CASH DIV ON 400 SHS RECORD 11/16/90 PAY 12/10/90	$ 20.00			$ 20.00
Total dividends earned		**$ 20.00**	**$ 0.00**		**$ 20.00**

3322

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

#2

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$64,501.60		$3,261.57	$67,763.17

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	8,651.31CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	10,745.57	3,261.57
TOTAL MONEY MARKET		3,261.57

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CEF DIVIDENDS CREDITED	49.00CR	49.00CR
AVERAGE YIELD 12/30/89 TO 1/15/90 7.62%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 08	1	PURCHASE	100	MC DONALDS CORP COMMON	33.8800	3,382.93	
1 09	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	3,233.54	
1 10	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,417.77	
1 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,382.93
1 16	1	DIVIDEND	49	REINVESTED DIVIDEND CEF AS OF 1/15/90			
1 17	1	PURCHASE	200	GREYHOUND CORPORATION	29.5000	6,039.18	
1 24	1	PURCHASE	200	SUPER VALU STORES INC	25.3750	5,202.34	
1 24	1	PURCHASE	50	WASTE MANAGEMENT INC	30.3750	1,559.88	
1 24	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,039.18
1 31	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,762.20

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 654C-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		AMETEK INCORPORATED	12.6250	6,312.50
1	200		GANNETT CO INC DEL	41.0000	8,200.00
1	200		GREYHOUND CORPORATION	29.1250	5,825.00
1	100		INTERPUBLIC GRP CO INC	30.5000	3,050.00
1	200		JAMES RIVER CORP OF VA	25.3750	5,075.00
1	200		MC DONALDS CORP COMMON	32.6250	6,525.00
1	500		PICCADILLY CAFETERIAS	13.5000	6,750.00
1	200		SAFETY KLEEN CORP	28.7500	5,750.00
1	200		SUPER VALU STORES INC	27.1250	5,425.00
1	150		WASTE MANAGEMENT INC	30.7500	4,612.50
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.3840	3,507.60
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9380	3,469.00
			VALUE OF PRICED SECURITIES		64,501.60

OWN STOCK IN OVER 60 WELL-KNOWN COMPANIES IN THE FAST-GROWING SOUTHEAST THROUGH THE SOUTHEASTERN GROWTH FUND: A UNIQUE INVESTMENT OPPORTUNITY PLUS PROFESSIONAL MANAGEMENT AND DIVERSIFICATION. SEE THE ENCLOSED INSERT, OR CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFSO

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8X08 8540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT

EDWARD G RAHALL

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801

304-252-6221

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$64,191.30	$2,306.59CR	$90.50	$66,588.39

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	2,306.59CR
NET CLOSING BALANCE		2,306.59CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	3,261.57	90.50
TOTAL MONEY MARKET		90.50

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CEF DIVIDENDS CREDITED	51.00CR	100.00CR
AVERAGE YIELD 1/16/90 TO 2/15/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 15	1	PURCHASE	200	TELE-COMMUNICTNS INC A	15.6250	3,222.07	
2 15	1	DIVIDEND	51	REINVESTED DIVIDEND CEF AS OF 2/15/90			
2 23	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,222.07
2 26	1	SALE	200-	AMETEK INCORPORATED	11.6750		2,306.59

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMETEK INCORPORATED	11.6750	3,562.50
1	200		GANNETT CO INC DEL	40.3750	8,075.00
1	200		GREYHOUND CORPORATION	30.2500	6,050.00
1	100		INTERPUBLIC GRP CO INC	30.5000	3,050.00
1	200		JAMES RIVER CORP OF VA	23.8750	4,775.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

99 410 FORM D WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	200		MC DONALDS CORP COMMON	31.5000	6,300.00
1	500		PICCADILLY CAFETERIAS	13.0000	6,500.00
1	200		SAFETY KLEEN CORP	29.1250	5,825.00
1	200		SUPER VALU STORES INC	27.1250	5,425.00
1	200		TELE-COMMUNICTNS INC A	14.2500	2,850.00
1	150		WASTE MANAGEMENT INC	31.6250	4,743.75
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.5870	3,538.05
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9940	3,497.00
			VALUE OF PRICED SECURITIES		64,191.30

3326

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$49,854.85	$9,703.81CR	$8,763.92	$68,322.58

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	2,306.59CR	9,703.81CR
NET CLOSING BALANCE		9,703.81CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	90.50	8,763.92
TOTAL MONEY MARKET		8,763.92

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	52.00CR	52.00CR
CEF DIVIDENDS CREDITED	10.00CR	110.00CR
AVERAGE YIELD 2/16/90 TO 3/15/90 7.42%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	2,306.59	
3 16	1	DIVIDEND	10	REINVESTED DIVIDEND CEF AS OF 3/15/90			
3 19	1	SALE	200-	SAFETY KLEEN CORP	32.3750		6,356.83
3 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	6,356.83	
3 29	1	DIVIDEND		AMETEK INCORPORATED QUANTITY 200			32.00
3 29	1	DIVIDEND		SAFETY KLEEN CORP QUANTITY 200			20.00
3 29	1	SALE	200-	GREYHOUND DIAL CORP	30.7500		6,028.43
3 29	1	PURCHASE	100	TELE-COMMUNICTNS INC A	13.6250	1,410.73	
3 29	1	SALE	100-	WASTE MANAGEMENT INC	34.5000		3,356.07
3 29	1	SALE	50-	WASTE MANAGEMENT INC	34.5000		1,678.04

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WPSO C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-8221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMETEK INCORPORATED	12.8750	3,862.50
1	200		GANNETT CO INC DEL	39.6250	7,925.00
1	100		INTERPUBLIC GRP CO INC	32.7500	3,275.00
1	200		JAMES RIVER CORP OF VA	25.0000	5,000.00
1	200		MC DONALDS CORP COMMON	31.7500	6,350.00
1	500		PICCADILLY CAFETERIAS	14.2500	7,125.00
1	200		SUPER VALU STORES INC	25.6250	5,125.00
1	300		TELE-COMMUNICTNS INC A	13.6250	4,087.50
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.8290	3,574.35
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.0610	3,530.50
			VALUE OF PRICED SECURITIES		49,854.85

SAFEGUARDING THE ENVIRONMENT IS EXPECTED TO BECOME AN IMPORTANT PART OF THE NATIONAL ECONOMY. NOW YOU CAN INVEST IN COMPANIES THAT ARE WELL-POSITIONED TO CAPITALIZE ON THIS BUSINESS THROUGH THE KEMPER ENVIRONMENTAL SERVICES FUND. ASK YOUR FINANCIAL CONSULTANT FOR DETAILS.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

1 303

FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$35,583.35	$30.00CR	$30,569.26	$66,182.61

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	9,703.81CR	30.00CR
NET CLOSING BALANCE		30.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	8,763.92	30,582.26
TOTAL MONEY MARKET		30,569.26

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	42.00CR	94.00CR
CEF DIVIDENDS CREDITED	72.00CR	182.00CR
AVERAGE YIELD 3/16/90 TO 4/16/90 7.48%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	1	SALE	200-	SUPER VALU STORES INC	25.7500		5,040.24
4 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	52.00	
4 06	1	DIVIDEND		WASTE MANAGEMENT INC QUANTITY 150			12.00
4 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	9,663.81	
4 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,040.24	
4 17	1	DIVIDEND	72	REINVESTED DIVIDEND CEF AS OF 4/16/90			
4 19	1	SALE	300-	AMETEK INCORPORATED	13.0000		3,805.91
4 19	1	SALE	100-	INTERPUBLIC GRP CO INC	32.3750		3,171.38
4 27	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 200			30.00
4 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	8,977.29	

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WFSI1C

48.087

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		GANNETT CO INC DEL	36.8750	7,375.00
1	200		JAMES RIVER CORP OF VA	22.8750	4,575.00
1	200		MC DONALDS CORP COMMON	30.2500	6,050.00
1	500		PICCADILLY CAFETERIAS	13.2500	6,625.00
1	300		TELE-COMMUNICTNS INC A	12.6250	3,787.50
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.0590	3,608.85
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1240	3,562.00
			VALUE OF PRICED SECURITIES		35,583.35

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT STOCK RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. SEE THE ENCLOSURE, THEN ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD Q RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$43,664.85		$26,391.46	$70,056.31

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	30.00CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	30,569.26	26,391.46
TOTAL MONEY MARKET		26,391.46

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	94.00CR
CEF DIVIDENDS CREDITED	168.00CR	350.00CR
AVERAGE YIELD 4/17/90 TO 5/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 01	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	30.00	
5 14	1	PURCHASE	100	COCA-COLA COMPANY	42.8750	4,375.80	
5 16	1	DIVIDEND	168	REINVESTED DIVIDEND CEF AS OF 5/15/90			
5 21	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,375.80

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		COCA-COLA COMPANY	45.1250	4,512.50
1	200		GANNETT CO INC DEL	41.1250	8,225.00
1	200		JAMES RIVER CORP OF VA	25.2500	5,050.00
1	200		MC DONALDS CORP COMMON	34.6250	6,925.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS011

63 566

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	500		PICCADILLY CAFETERIAS	14.5000	7,250.00
1	300		TELE-COMMUNICTNS INC A	14.8750	4,462.50
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.2990	3,644.85
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1900	3,595.00
			VALUE OF PRICED SECURITIES		43,864.85

WAITING FOR THE "PERFECT TIME" TO INVEST? ASK YOUR FINANCIAL CONSULTANT TO SEND YOU THE FULL STORY OF "LOUIE THE LOSER," A FICTIONAL CHARACTER WHO HAS HAD SURPRISING SUCCESS INVESTING IN A NUMBER OF AMERICAN FUNDS AT THE TOP OF THE MARKET EACH YEAR!

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WFS01C

63 947

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$44,415.05	$3,649.84DB	$29,034.65	$69,799.86

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	3,649.84DB
NET CLOSING BALANCE		3,649.84DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	26,391.46	29,034.65
TOTAL MONEY MARKET		29,034.65

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	17.00CR	111.00CR
CEF DIVIDENDS CREDITED	177.00CR	527.00CR
AVERAGE YIELD 5/16/90 TO 6/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 01	1	SALE	200-	MC DONALDS CORP COMMON	35.0000		6,875.37
6 04	1	PURCHASE	100	RALLYS INC	20.7500	2,138.13	
6 05	1	SALE	100-	COCA-COLA COMPANY	46.5000		4,563.12
6 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,737.24	
6 18	1	DIVIDEND		MC DONALDS CORP COMMON QUANTITY 200			17.00
6 18	1	PURCHASE	200	CONAGRA INCORPORATED	33.5000	6,851.17	
6 18	1	DIVIDEND	177	REINVESTED DIVIDEND CEF AS OF 6/15/90			
6 19	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,580.12	
6 25	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,851.17
6 29	1	PURCHASE	100	GOLDEN VALLEY MICROWAVE FOODS INC	36.6250	3,649.84	

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFSDIC

43 063

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		CONAGRA INCORPORATED	35.3750	7,075.00
1	200		GANNETT CO INC DEL	38.2500	7,650.00
1	100		GOLDEN VALLEY MICROWAVE FOODS INC	34.8750	3,487.50
1	200		JAMES RIVER CORP OF VA	26.7500	5,350.00
1	500		PICCADILLY CAFETERIAS	15.0000	7,500.00
1	100		RALLYS INC	17.7500	1,775.00
1	300		TELE-COMMUNICTNS INC A	14.2500	4,275.00
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.5170	3,677.55
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV 0Y-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.2500	3,625.00
			VALUE OF PRICED SECURITIES		44,415.05

WITH THE STOCK MARKET'S CLIMB DURING THE PAST SEVERAL MONTHS, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? NOW'S A GOOD TIME TO REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT. CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

7 7 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 8540-0700	232-08-2218	

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$44,749.85	$2,784.DB	$25,723.81	$87,689.45

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	3,849.84DB	2,784.21DB
NET CLOSING BALANCE		2,784.21DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	29,034.85	25,723.81
TOTAL MONEY MARKET		25,723.81

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	150.00CR	261.00CR
CEF DIVIDENDS CREDITED	189.00CR	718.00CR
AVERAGE YIELD 6/18/90 TO 7/18/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 02	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 200			60.00
7 02	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
7 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	120.00	
7 09	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,649.84
7 17	1	DIVIDEND	189	REINVESTED DIVIDEND CEF AS OF 7/18/90			
7 30	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 200			30.00
7 30	1	STOCK DIV	50	GOLDEN VALLEY MICROWAVE FOODS INC			
7 31	1	PURCHASE	50	GOLDEN VALLEY MICROWAVE FOODS INC	21.7500	1,130.88	
7 31	1	PURCHASE	100	RALLYS INC	16.0000	1,653.53	
7 31	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	30.00	

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6540-0700	232-08-2218	

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		CONAGRA INCORPORATED	34.5000	6,900.00
1	200		GANNETT CO INC DEL	36.2500	7,250.00
1	200		GOLDEN VALLEY MICROWAVE FOODS INC	21.5000	4,300.00
1	200		JAMES RIVER CORP OF VA	24.8750	4,975.00
1	500		PICCADILLY CAFETERIAS	13.6250	6,812.50
1	200		RALLYS INC	16.0000	3,200.00
1	300		TELE-COMMUNICTNS INC A	13.1250	3,937.50
			FIXED INCOME SECURITIES		
1	15000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.7690	3,715.35
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.3180	3,659.50
			VALUE OF PRICED SECURITIES		44,749.85

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND WILL BEGIN IN AUGUST TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

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FORM 49 WF501C

65 053

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8540-0700	232-06-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$51,576.50		$10,814.67	$62,391 17

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	2,784.21DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	25,723.81	10,814 67
TOTAL MONEY MARKET		10,814.67

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	261.00CR
CEF DIVIDENDS CREDITED	138.45CR	854.45CR
AVERAGE YIELD ON MONEY MARKET	7/17/90 TO 8/15/90	7.36%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 02	1	PURCHASE	100	BROWNING-FERRIS INDUSTRIES INC	40.0000	4,103.63	
8 02	1	PURCHASE	50	BROWNING-FERRIS INDUSTRIES INC	40.0000	2,051.81	
8 03	1	PURCHASE	200	TELE-COMMUNICTNS INC A	12.2500	2,537.44	
8 07	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,784.21
8 08	1	PURCHASE	100	GOLDEN VALLEY MICROWAVE FOODS INC	19.2500	1,985.10	
8 08	1	PURCHASE	100	JAMES RIVER CORP OF VA	22.3750	2,303.91	
8 09	1	SALE	200-	CONAGRA INCORPORATED	33.7500		6,635.85
8 09	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,155.44
8 10	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,537.44
8 14	1	PURCHASE	100	CHIRON CORP	40.0000	4,093.83	
8 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,289.01

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 16	1	DIVIDEND	138.45	REINVESTED DIVIDEND CEF AS OF 8/15/90			
8 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	6,835.85	
8 20	1	PURCHASE	50	CHIRON CORP	35.5000	1,823.51	
8 21	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,093.83
8 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		1,823.51
8 28	1	EXCHANGE	1000-	MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82			
8 28	1	EXCHANGE	1000	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15.90 DTD 9/15/82			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	150		BROWNING-FERRIS INDUSTRIES INC	37.8750	5,681 25
1	150		CHIRON CORP	34.5000	5,175.00
1	200		GANNETT CO INC DEL	34.2500	6,850.00
1	300		GOLDEN VALLEY MICROWAVE FOODS INC	16.8750	5,062.50
1	300		JAMES RIVER CORP OF VA	23.3750	7,012.50
1	500		PICCADILLY CAFETERIAS	11.5000	5,750.00
1	200		RALLYS INC	12.7500	2,550.00
1	500		TELE-COMMUNICTNS INC A	11.0000	5,500.00
			FIXED INCOME SECURITIES		
1	14000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.4450	3,702.30

---CONTINUED ON NEXT PAGE---

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8540-0700	232-08-2218

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	1000		MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/90 DTD 9/15/82	26.4450	264.45
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0570	4,028.50
			VALUE OF PRICED SECURITIES		$1,576.50

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND HAS BEGUN TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFSO

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-8221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
BECKLEY WV 25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$45,102.38	$575.12CR	$11,067.35	$56,744.85

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	575.12CR
NET CLOSING BALANCE		575.12CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	10,814.67	11,067.35
TOTAL MONEY MARKET		11,067.35

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	30.00CR	291.00CR
CEF DIVIDENDS CREDITED	78.21CR	932.66CR
AVERAGE YIELD ON MONEY MARKET	8/16/90 TO 9/17/90	7.29%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 04	1	DIVIDEND		CONAGRA INCORPORATED QUANTITY 200			30.00
9 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	30.00	
9 17	1	REDEMPTION	1000-	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/90 DTD 9/15/82			
9 17	1	REDEMPTION		MISSOURI ST HSG DEV CXXX			251.19
9 18	1	SALE	1452-	MFS GOVT INCOME PLUS - TRUST SBI AS OF 9/17/90	6.8200		9,892.64
9 18	1	DIVIDEND	78.21	REINVESTED DIVIDEND CEF AS OF 9/17/90			
9 18	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	251.19	
9 21	1	PURCHASE	1116	MFS WORLDWIDE TOTAL - RETURN TRUST SBI	8.9600	9,999.36	

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WFS01C

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 9/20/90			
9 21	1	SALE	200-	RALLYS INC	10.5000		2,043.74
9 24	1	RECEIVED	1452	MFS GOVT INCOME PLUS ~ TRUST SBI			
9 25	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	9,892.64	
9 26	1	PURCHASE	50	BROWNING-FERRIS INDUSTRIES INC	28.3750	1,488.62	
9 27	1	TO PLAN ACCT	1116-	MFS WORLDWIDE TOTAL ~ RETURN TRUST SBI			
9 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,999.36

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BROWNING-FERRIS INDUSTRIES INC	30.7500	6,150.00
1	150		CHIRON CORP	33.7500	5,062.50
1	200		GANNETT CO INC DEL	30.8750	6,175.00
1	300		GOLDEN VALLEY MICROWAVE FOODS INC	14.5000	4,350.00
1	300		JAMES RIVER CORP OF VA	19.0000	5,700.00
1	500		PICCADILLY CAFETERIAS	10.0000	5,000.00
1	500		TELE-COMMUNICTNS INC A	9.8750	4,937.50
			FIXED INCOME SECURITIES		
1	14000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.5170	3,712.38
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	4,015.00
			VALUE OF PRICED SECURITIES		45,102.38

---CONTINUED ON NEXT PAGE---

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FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	3

CURRENTLY, YOUR ACCOUNT'S INVESTMENT OBJECTIVE (EXPLAINED ON THE BACK) APPEARS ON EACH PAGE. IRAS NORMALLY SEEK "QUALITY INCOME" OR "QUALITY INCOME AND/OR GROWTH." OTHER OBJECTIVES REPRESENT UNUSUAL RISK FOR IRAS. FOR DETAILS, CALL YOUR FINANCIAL CONSULTANT.

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801

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BECKLEY WV
25801

304-252-6221

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$50,142.08	$45.00CR	$2,913.61	$53,100.69

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	575.12CR	45.00CR
NET CLOSING BALANCE		45.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	11,087.35	2,913.61
TOTAL MONEY MARKET		2,913.61

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	189.00CR	480.00CR
CEF DIVIDENDS CREDITED	87.52CR	1,000.18CR
AVERAGE YIELD ON MONEY MARKET	9/18/90 TO 10/15/90	7.25%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 200			60.00
10 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
10 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	695.12	
10 05	1	DIVIDEND		BROWNING-FERRIS INDUSTRIES INC QUANTITY 150			24.00
10 05	1	SALE	200-	GANNETT CO INC DEL	33.2500		6,529.41
10 09	1	PURCHASE	200	PEPSICO INCORPORATED	24.0000	4,922.45	
10 09	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	24.00	
10 10	1	PURCHASE	50	CHIRON CORP	34.2500	1,788.31	
10 10	1	PURCHASE	200	GOLDEN VALLEY MICROWAVE FOODS INC	10.6250	2,205.87	
10 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,000.00

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 8540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 16	1	DIVIDEND	67.52	REINVESTED DIVIDEND CEF AS OF 10/15/90			
10 16	1	CHECK ISSUED		CHECK ISSUED #13217519		2,000.00	
10 17	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,267.22
10 18	1	PURCHASE	200	AMERICAN TEL&TEL CO NEW	31.7500	6,496.15	
10 22	1	SALE	100-	JAMES RIVER CORP OF VA	19.7500		1,922.99
10 25	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,496.15
10 30	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 300			45.00
10 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	1,922.[illegible]	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		AMERICAN TEL&TEL CO NEW	34.0000	6,800.00
1	200		BROWNING-FERRIS INDUSTRIES INC	27.8750	5,575.00
1	200		CHIRON CORP	38.0000	7,600.00
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	9.6250	4,812.50
1	200		JAMES RIVER CORP OF VA	18.7500	3,750.00
1	200		PEPSICO INCORPORATED	24.0000	4,800.00
1	500		PICCADILLY CAFETERIAS	8.2500	4,125.00
1	500		TELE-COMMUNICTNS INC A	9.8750	4,937.50
			FIXED INCOME SECURITIES		
1	14000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.6220	3,727.08
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	4,015.00
			VALUE OF PRICED SECURITIES		50,142.08

---CONTINUED ON NEXT PAGE---

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FORM 10 WFSIC

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 8540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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25801

- - FOR THE ACCOUNT OF - -
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25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	3

TO AVOID POSSIBLE FUTURE IRA INQUIRIES, PLEASE
TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL
SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT.
IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR
FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801

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- - FOR THE ACCOUNT OF - -
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BECKLEY WV
25801

304-252-6221

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$40,093.94		$15,160.79	$55,254.73

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	45.00CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	2,913.61	.00
GSP GOVT SEC PORTFOLIO	.00	15,160.79
TOTAL MONEY MARKET		15,160.79

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	480.00CR
CEF DIVIDENDS CREDITED	28.81CR	1,028.99CR
AVERAGE YIELD ON MONEY MARKET 10/18/90 TO 11/15/90		7.26%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 02	1	SALE	200-	AMERICAN TELETEL CO NEW	34.6250		6,785.80
11 08	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	45.00	
11 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	6,785.80	
11 14	1	PURCHASE	100	BROWNING-FERRIS INDUSTRIES INC	23.5000	2,418.68	
11 14	1	SALE	200-	CHIRON CORP	39.7500		7,806.25
11 16	1	DIVIDEND	28.81	REINVESTED DIVIDEND CEF AS OF 11/15/90			
11 23	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,387.57	
11 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	15,160.79	
11 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		15,160.79

---CONTINUED ON NEXT PAGE---

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707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		BROWNING-FERRIS INDUSTRIES INC	21.1250	6,337.50
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	11.1250	5,562.50
1	200		JAMES RIVER CORP OF VA	22.8750	4,575.00
1	300		PEPSICO INCORPORATED	25.6250	5,125.00
1	500		PICCADILLY CAFETERIAS	8.6250	4,312.50
1	500		TELE-COMMUNICTNS INC A	12.1250	6,062.50
			FIXED INCOME SECURITIES		
1	14000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	29.2210	4,090.94
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0560	4,028.00
			VALUE OF PRICED SECURITIES		40,093.94

TO AVOID POSSIBLE FUTURE IRS INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

Wheat, First Securities, Inc.

707 East Main Street
Richmond VA, 23219
(804) 649-2311

November 9, 1990

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

RE: ACCT# 6540-0700

Dear Client,

On Wednesday, November 28th, we will be automatically transferring your money market balance from the Cash Equivalent Fund Money Market Portfolio to the Cash Equivalent Fund Government Securities Money Market Portfolio. The prospectus you previously received describes both portfolios and you may consult it for more information.

This transfer is being effected because the Government Securities Portfolio provides you with an extra margin of safety by investing in securities issued or guaranteed by the U.S. Government. The government guarantee of the securities owned by the Portfolio does not guarantee the net asset value of the Portfolio's shares, which the Portfolio seeks to maintain at $1.00 per share. Further, the seven day average yield on the Government Money Market Portfolio is comparable to the seven day average yield on your existing Money Market Portfolio. While this yield relationship may not always hold true, we believe the Government Portfolio provides you with the best combination of income and safety available in the Cash Equivalent Fund Portfolios.

In addition, we plan to enhance the features of our Government Securities Portfolio in January. We think the new services, including unlimited, no-minimum checking, will allow you to access your capital through one of the most competitive money market accounts offered today.

If you have any questions regarding this change, would like another copy of the prospectus, or for any reason you do not wish to take advantage of this transfer, please contact your Financial Consultant by Friday, November 23, 1990.

Sincerely,
Wheat First Securities/
Butcher & Singer

Wheat, First Securities, Inc. is the parent company of Butcher & Singer Inc Members New York Stock Exchange and SIPC

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
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WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$30,501.08	$5,217 08CR	$20,645.04	$56,363.18

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	5,217.08CR
NET CLOSING BALANCE		5,217.08CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	15,160.79	20,645.04
TOTAL MONEY MARKET		20,645.04

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	480.00CR
CEF DIVIDENDS CREDITED	28.67CR	1,057.66CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.17%
GSP DIVIDENDS CREDITED	118.38CR	118.38CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.03%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 08	1	SALE	200-	PEPSICO INCORPORATED	27.5000		5,365.87
12 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,365.87	
12 21	1	SALE	200-	JAMES RIVER CORP OF VA	26.5000		5,188.41
12 31	1	DIVIDEND		CEF-MONEY MKT PORTFOLIO			28.67
12 31	1	DIVIDEND	118.38	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		BROWNING-FERRIS INDUSTRIES INC	22.2500	6,675.00
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	10.0000	5,000.00
1	500		PICCADILLY CAFETERIAS	8.7500	4,375.00
1	500		TELE-COMMUNICTNS INC A	13.2500	6,625.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-08-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	14000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	27.1290	3,798.06
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0580	4,028.00
			VALUE OF PRICED SECURITIES		30,501.06
MF	1701.469		MFS GOVT INCOME PLUS TR (AS OF 12/21)	7.0300	11,961.32

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IT HAS BEEN A PLEASURE SERVING YOU IN 1990, AND WE WANT YOU TO KNOW THAT WE APPRECIATE YOUR BUSINESS. WE LOOK FORWARD TO SERVING YOU IN THE NEW YEAR, AND WE WILL DO EVERYTHING POSSIBLE TO MERIT THE CONFIDENCE YOU HAVE SHOWN IN US.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0350	233-17-4890

#2

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$89,454.25		$680.55	$90,134.80

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	1,453.79CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	18,354.07	680.55
TOTAL MONEY MARKET		680.55

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CEF DIVIDENDS CREDITED	58.00CR	58.00CR
AVERAGE YIELD 12/30/89 TO 1/15/90 7.62%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 04	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		7,209.87
1 08	1	PURCHASE	100	MC DONALDS CORP COMMON	33.0000	3,382.93	
1 09	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	3,245.89	
1 10	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,417.77	
1 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,382.93
1 16	1	DIVIDEND	58	REINVESTED DIVIDEND CEF AS OF 1/15/90			
1 17	1	PURCHASE	300	GREYHOUND CORPORATION	29.5000	9,040.18	
1 24	1	PURCHASE	200	SUPER VALU STORES INC	25.3750	5,202.34	
1 24	1	PURCHASE	50	WASTE MANAGEMENT INC	30.3750	1,559.86	
1 24	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,040.18
1 31	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,762.20

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		AMETEK INCORPORATED	12.6250	6,312.50
1	300		GANNETT CO INC DEL	41.0000	12,300.00
1	300		GREYHOUND CORPORATION	29.1250	8,737.50
1	100		INTERPUBLIC GRP CO INC	30.5000	3,050.00
1	300		JAMES RIVER CORP OF VA	25.3750	7,612.50
1	200		MC DONALDS CORP COMMON	32.6250	6,525.00
1	500		PICCADILLY CAFETERIAS	13.5000	6,750.00
1	300		SAFETY KLEEN CORP	28.7500	8,625.00
1	200		SUPER VALU STORES INC	27.1250	5,425.00
1	150		WASTE MANAGEMENT INC	30.7500	4,612.50
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.3840	5,846.00
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	21.1830	7,414.05
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9380	6,244.20
			VALUE OF PRICED SECURITIES		89,454.25

OWN STOCK IN OVER 60 WELL-KNOWN COMPANIES IN THE FAST-GROWING SOUTHEAST THROUGH THE SOUTHEASTERN GROWTH FUND: A UNIQUE INVESTMENT OPPORTUNITY PLUS PROFESSIONAL MANAGEMENT AND DIVERSIFICATION. SEE THE ENCLOSED INSERT, OR CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT

EDWARD G RAHALL

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801

304-252-8221

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$88,542.20	$200.17CR	$70.55	$88,812.92

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	200.17CR
NET CLOSING BALANCE		200.17CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	680.55	70.55
TOTAL MONEY MARKET		70.55

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CEF DIVIDENDS CREDITED	40.00CR	98.00CR
AVERAGE YIELD 1/16/90 TO 2/15/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 16	1	DIVIDEND	40	REINVESTED DIVIDEND CEF AS OF 2/15/90			
2 16	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		650.00
2 20	1	CHECK ISSUED		CHECK ISSUED #13216338		650.00	
2 26	1	SALE	200-	AMETEK INCORPORATED	11.6750		2,308.59
2 26	1	PURCHASE	150	TELE-COMMUNICTNS INC A	13.5000	2,106.42	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMETEK INCORPORATED	11.8750	3,562.50
1	300		GANNETT CO INC DEL	40.3750	12,112.50
1	300		GREYHOUND CORPORATION	30.2500	9,075.00
1	100		INTERPUBLIC GRP CO INC	30.5000	3,050.00
1	300		JAMES RIVER CORP OF VA	23.6750	7,102.50

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	200		MC DONALDS CORP COMMON	31.5000	6,300.00
1	500		PICCADILLY CAFETERIAS	13.0000	6,500.00
1	300		SAFETY KLEEN CORP	29.1250	8,737.50
1	200		SUPER VALU STORES INC	27.1250	5,425.00
1	150		TELE-COMMUNICTNS INC A	14.2500	2,137.50
1	150		WASTE MANAGEMENT INC	31.6250	4,743.75
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.5870	5,896.75
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT DY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	21.5560	7,544.60
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9940	6,294.60
			VALUE OF PRICED SECURITIES		88,542.20

3354

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0380	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$86,414.80	$11,989.16CR	$9,784.77	$88,188.43

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	200.17CR	11,989.16CR
NET CLOSING BALANCE		11,989.16CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	70.58	9,784.77
TOTAL MONEY MARKET		9,784.77

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	32.00CR	32.00CR
CEF DIVIDENDS CREDITED	1.00CR	99.00CR
AVERAGE YIELD 2/16/90 TO 3/15/90 7.42%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	200.17	
3 16	1	DIVIDEND	1	REINVESTED DIVIDEND CEF AS OF 3/15/90			
3 19	1	SALE	300-	SAFETY KLEEN CORP	31.2500		9,513.05
3 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	9,513.05	
3 29	1	DIVIDEND		AMETEK INCORPORATED QUANTITY 200			32.00
3 29	1	SALE	200-	GREYHOUND DIAL CORP	30.7500		6,032.45
3 29	1	SALE	100-	GREYHOUND DIAL CORP	30.7500		3,016.22
3 29	1	PURCHASE	150	TELE-COMMUNICTNS INC A	13.6250	2,125.62	
3 29	1	SALE	100-	WASTE MANAGEMENT INC	34.5000		3,356.07
3 29	1	SALE	50-	WASTE MANAGEMENT INC	34.5000		1,678.04

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Wheat, First Securities, Inc.

707 EAST MAIN ST , RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMETEK INCORPORATED	12.8750	3,862.50
1	300		GANNETT CO INC DEL	39.5250	11,857.50
1	100		INTERPUBLIC GRP CO INC	32.7500	3,275.00
1	300		JAMES RIVER CORP OF VA	25.0000	7,500.00
1	200		MC DONALDS CORP COMMON	31.7500	6,350.00
1	500		PICCADILLY CAFETERIAS	14.2500	7,125.00
1	200		SUPER VALU STORES INC	25.6250	5,125.00
1	300		TELE-COMMUNICTNS INC A	13.6250	4,087.50
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	23.8290	5,957.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/28/85 FC 12/01/10 CALL 6/01/00 @ 103.000	13.9710	4,889.85
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.0610	6,354.90
			VALUE OF PRICED SECURITIES		66,414.50

SAFEGUARDING THE ENVIRONMENT IS EXPECTED TO BECOME AN IMPORTANT PART OF THE NATIONAL ECONOMY. NOW YOU CAN INVEST IN COMPANIES THAT ARE WELL-POSITIONED TO CAPITALIZE ON THIS BUSINESS THROUGH THE KEMPER ENVIRONMENTAL SERVICES FUND. ASK YOUR FINANCIAL CONSULTANT FOR DETAILS.

---END OF STATEMENT---

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-8221

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$51,743.60	$45.00CR	$33,880.48	$85,669.08

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	11,989.18CR	45.00CR
NET CLOSING BALANCE		45.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	9,784.77	33,880.48
TOTAL MONEY MARKET		33,880.48

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	57.00CR	89.00CR
CEF DIVIDENDS CREDITED	77.00CR	176.00CR
AVERAGE YIELD 3/16/90 TO 4/16/90 7.48%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	1	SALE	200-	SUPER VALU STORES INC	25.7500		5,040.24
4 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	32.00	
4 05	1	DIVIDEND		WASTE MANAGEMENT INC QUANTITY 150			12.00
4 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	11,989.18	
4 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,040.24	
4 17	1	DIVIDEND	77	REINVESTED DIVIDEND CEF AS OF 4/16/90			
4 19	1	SALE	300-	AMETEK INCORPORATED	13.0000		3,805.91
4 19	1	SALE	100-	INTERPUBLIC GRP CO INC	32.3750		3,171.38
4 27	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 300			45.00
4 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,977.29	

---CONTINUED ON NEXT PAGE---

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
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YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		GANNETT CO INC DEL	36.8750	11,062.50
1	300		JAMES RIVER CORP OF VA	22.8750	6,862.50
1	200		MC DONALDS CORP COMMON	30.2500	6,050.00
1	500		PICCADILLY CAFETERIAS	13.2500	6,625.00
1	300		TELE-COMMUNICTNS INC A	12.6250	3,787.50
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.0590	6,014.75
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT DY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	14.0850	4,929.75
1	80000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1240	6,411.60
			VALUE OF PRICED SECURITIES		51,743.60

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT STOCK RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. SEE THE ENCLOSURE, THEN ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$56,117.15	$4,780.01CR	$29,737.66	$90,634.82

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	45.00CR	4,780.01CR
NET CLOSING BALANCE		4,780.01CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	33,880.46	29,737.66
TOTAL MONEY MARKET		29,737.66

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	89.00CR
CEF DIVIDENDS CREDITED	188.00CR	364.00CR
AVERAGE YIELD 4/17/90 TO 5/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 01	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	45.00	
5 14	1	PURCHASE	100	COCA-COLA COMPANY	42.8750	4,375.80	
5 16	1	DIVIDEND	188	REINVESTED DIVIDEND CEF AS OF 5/15/90			
5 21	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,375.80
5 22	1	SALE	300-	TELE-COMMUNICTNS INC A	16.3750		4,780.01

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		COCA-COLA COMPANY	45.1250	4,512.50
1	300		GANNETT CO INC DEL	41.1250	12,337.50

---CONTINUED ON NEXT PAGE---

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STATEMENT

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EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	300		JAMES RIVER CORP OF VA	25.2500	7,575.00
1	200		MC DONALDS CORP COMMON	34.6250	6,925.00
1	600		PICCADILLY CAFETERIAS	14.5000	7,250.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.2990	6,074.75
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 8/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	14.2040	4,971.40
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1900	6,471.00
			VALUE OF PRICED SECURITIES		58,117.15

WAITING FOR THE "PERFECT TIME" TO INVEST? ASK YOUR FINANCIAL CONSULTANT TO SEND YOU THE FULL STORY OF "LOUIE THE LOSER," A FICTIONAL CHARACTER WHO HAS HAD SURPRISING SUCCESS INVESTING IN A NUMBER OF AMERICAN FUNDS AT THE TOP OF THE MARKET EACH YEAR!

---END OF STATEMENT---

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

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EDWARD G RAHALL
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304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
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WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$57,001.12	$3,649.84DB	$37,168.15	$90,519.43

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,780.01CR	3,649.84DB
NET CLOSING BALANCE		3,649.84DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	29,737.66	37,168.15
TOTAL MONEY MARKET		37,168.15

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	17.00CR	106.00CR
CEF DIVIDENDS CREDITED	209.00CR	573.00CR
AVERAGE YIELD 5/16/90 TO 6/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 01	1	SALE	200-	MC DONALDS CORP COMMON	34.8750		6,850.66
6 04	1	PURCHASE	100	RALLYS INC	20.7500	2,138.13	
6 05	1	SALE	100-	COCA-COLA COMPANY	46.5000		4,563.12
6 05	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,780.01	
6 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,712.53	
6 18	1	DIVIDEND		MC DONALDS CORP COMMON QUANTITY 200			17.00
6 18	1	PURCHASE	200	CONAGRA INCORPORATED	33.5000	6,851.17	
6 18	1	DIVIDEND	209	REINVESTED DIVIDEND CEF AS OF 6/15/90			
6 19	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,580.12	
6 25	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,851.17
6 29	1	PURCHASE	100	GOLDEN VALLEY MICROWAVE FOODS INC	36.6250	3,649.84	

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD Q RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-0350	233-17-4890

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		CONAGRA INCORPORATED	35.3750	7,075.00
1	300		GANNETT CO INC DEL	38.2500	11,475.00
1	100		GOLDEN VALLEY MICROWAVE FOODS INC	34.8750	3,487.50
1	300		JAMES RIVER CORP OF VA	26.7500	8,025.00
1	500		PICCADILLY CAFETERIAS	15.0000	7,500.00
1	100		RALLYS INC	17.7500	1,775.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.5170	6,129.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.3125	5,009.37
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.2500	6,525.00
			VALUE OF PRICED SECURITIES		57,001.12

WITH THE STOCK MARKET'S CLIMB DURING THE PAST SEVERAL MONTHS, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? NOW'S A GOOD TIME TO REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT. CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

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ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6540-0350	233-17-4890	

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STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$57,382.47	$2,784.DB	$33,954.31	$88,552.57

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	3,649.84DB	2,784.21DB
NET CLOSING BALANCE		2,784.21DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	37,168.15	33,954.31
TOTAL MONEY MARKET		33,954.31

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	195.00CR	301.00CR
CEF DIVIDENDS CREDITED	241.00CR	814.00CR
AVERAGE YIELD 6/16/90 TO 7/16/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 02	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 300			90.00
7 02	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			50.00
7 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	150.00	
7 09	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,649.84
7 17	1	DIVIDEND	241	REINVESTED DIVIDEND CEF AS OF 7/16/90			
7 30	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 300			45.00
7 30	1	STOCK DIV	50	GOLDEN VALLEY MICROWAVE FOODS INC			
7 31	1	PURCHASE	50	GOLDEN VALLEY MICROWAVE FOODS INC	21.7500	1,130.68	
7 31	1	PURCHASE	100	RALLYS INC	16.0000	1,653.53	
7 31	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	45.00	

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6540-0350	233-17-4890	

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
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STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		CONAGRA INCORPORATED	34.5000	6,900.00
1	300		GANNETT CO INC DEL	36.2500	10,875.00
1	200		GOLDEN VALLEY MICROWAVE FOODS INC	21.5000	4,300.00
1	300		JAMES RIVER CORP OF VA	24.8750	7,462.50
1	500		PICCADILLY CAFETERIAS	13.6250	6,812.50
1	200		RALLYS INC	16.0000	3,200.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	24.7690	6,192.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.4375	5,053.12
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.3190	6,587.10
			VALUE OF PRICED SECURITIES		57,382.47

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND WILL BEGIN IN AUGUST TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

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FORM ID WFS01C

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YOUR FINANCIAL CONSULTANT

EDWARD G RAHALL

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801

304-252-8221

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$60,443.80		$23,964.92	$84,408.72

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	2,784.21DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	33,954.31	23,964.92
TOTAL MONEY MARKET		23,964.92

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	301.00CR
CEF DIVIDENDS CREDITED	191.48CR	1,005.48CR
AVERAGE YIELD ON MONEY MARKET	7/17/90 TO 8/15/90	7.36%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 02	1	PURCHASE	100	BROWNING-FERRIS INDUSTRIES INC	40.0000	4,103.63	
8 02	1	PURCHASE	50	BROWNING-FERRIS INDUSTRIES INC	40.0000	2,051.81	
8 07	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,784.21
8 08	1	PURCHASE	100	GOLDEN VALLEY MICROWAVE FOODS INC	19.2500	1,985.10	
8 09	1	SALE	200-	CONAGRA INCORPORATED	33.7500		6,635.85
8 09	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,155.44
8 14	1	PURCHASE	100	CHIRON CORP	39.7500	4,068.46	
8 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		1,985.10
8 16	1	DIVIDEND	191.48	REINVESTED DIVIDEND CEF AS OF 8/15/90			
8 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	6,635.85	

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ACCOUNT NUMBER	TAX I.D. NUMBER
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NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 20	1	PURCHASE	50	CHIRON CORP	35.5000	1,823.51	
8 21	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,068.48
8 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		1,823.51

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	150		BROWNING-FERRIS INDUSTRIES INC	37.8750	5,681.25
1	150		CHIRON CORP	34.5000	5,175.00
1	300		GANNETT CO INC DEL	34.2500	10,275.00
1	300		GOLDEN VALLEY MICROWAVE FOODS INC	16.8750	5,062.50
1	300		JAMES RIVER CORP OF VA	23.3750	7,012.50
1	500		PICCADILLY CAFETERIAS	11.5000	5,750.00
1	200		RALLYS INC	12.7500	2,550.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.4450	6,611.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0570	7,251.30
			VALUE OF PRICED SECURITIES		60,443.80

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND HAS BEGUN TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS01C

L 799

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

304-252-6221

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$54,456.25	$575.12CR	$24,053.22	$79,084.59

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	575.12CR
NET CLOSING BALANCE		575.12CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	23,964.92	24,053.22
TOTAL MONEY MARKET		24,053.22

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	30.00CR	331.00CR
CEF DIVIDENDS CREDITED	165.02CR	1,170.50CR
AVERAGE YIELD ON MONEY MARKET	8/16/90 TO 9/17/90	7.29%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 04	1	DIVIDEND		CONAGRA INCORPORATED QUANTITY 200			30.00
9 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	30.00	
9 18	1	SALE	1452-	MFS GOVT INCOME PLUS ~ TRUST SBI AS OF 9/17/90	6.8200		9,892.64
9 18	1	DIVIDEND	165.02	REINVESTED DIVIDEND CEF AS OF 9/17/90			
9 21	1	PURCHASE	1118	MFS WORLDWIDE TOTAL ~ RETURN TRUST SBI AS OF 9/20/90	8.9600	9,999.36	
9 21	1	SALE	200-	RALLYS INC	10.5000		2,043.74
9 24	1	RECEIVED	1452	MFS GOVT INCOME PLUS ~ TRUST SBI			
9 25	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	9,892.64	

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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110 1/2 MAIN ST
BECKLEY WV 25801

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NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 28	1	PURCHASE	50	BROWNING-FERRIS INDUSTRIES INC	28.3750	1,468.82	
9 27	1	TO PLAN ACCT	1118-	MFS WORLDWIDE TOTAL - RETURN TRUST SBI			
9 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,999.38

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BROWNING-FERRIS INDUSTRIES INC	30.7500	6,150.00
1	150		CHIRON CORP	33.7500	5,062.50
1	300		GANNETT CO INC DEL	30.8750	9,262.50
1	300		GOLDEN VALLEY MICROWAVE FOODS INC	14.5000	4,350.00
1	300		JAMES RIVER CORP OF VA	19.0000	5,700.00
1	500		PICCADILLY CAFETERIAS	10.0000	5,000.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.5170	6,629.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT DY=10% CPN 0.000% DUE 6/01/25 DTD 6/28/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	7,227.00
			VALUE OF PRICED SECURITIES		54,456.25

CURRENTLY, YOUR ACCOUNT'S INVESTMENT OBJECTIVE (EXPLAINED ON THE BACK) APPEARS ON EACH PAGE. IRAS NORMALLY SEEK "QUALITY INCOME" OR "QUALITY INCOME AND/OR GROWTH." OTHER OBJECTIVES REPRESENT UNUSUAL RISK FOR IRAS. FOR DETAILS, CALL YOUR FINANCIAL CONSULTANT.

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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25801

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NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$62,845.00	$45.00CR	$8,577.78	$71,267.78

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	575.12CR	45.00CR
NET CLOSING BALANCE		45.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	24,053.22	8,577.78
TOTAL MONEY MARKET		8,577.78

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	219.00CR	550.00CR
CEF DIVIDENDS CREDITED	139.68CR	1,310.18CR
AVERAGE YIELD ON MONEY MARKET	9/18/90 TO 10/15/90	7.25%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 300			90.00
10 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
10 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	725.12	
10 05	1	DIVIDEND		BROWNING-FERRIS INDUSTRIES INC QUANTITY 150			24.00
10 09	1	PURCHASE	200	PEPSICO INCORPORATED	24.0000	4,922.45	
10 09	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	24.00	
10 10	1	PURCHASE	50	CHIRON CORP	34.2500	1,788.31	
10 10	1	PURCHASE	200	GOLDEN VALLEY MICROWAVE FOODS INC	10.6250	2,205.87	
10 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,000.00
10 16	1	DIVIDEND	139.68	REINVESTED DIVIDEND CEF			

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4880	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 10/15/90			
10 16	1	CHECK ISSUED		CHECK ISSUED #13217518		6,000.00	
10 17	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		8,896.63
10 18	1	PURCHASE	200	AMERICAN TEL&TEL CO NEW	31.7500	6,496.15	
10 22	1	SALE	100-	GANNETT CO INC DEL	31.7500		3,105.55
10 22	1	SALE	100-	JAMES RIVER CORP OF VA	19.7500		1,922.99
10 25	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		6,496.15
10 30	1	DIVIDEND		JAMES RIVER CORP OF VA QUANTITY 300			45.00
10 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,028.54	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		AMERICAN TEL&TEL CO NEW	34.0000	6,800.00
1	200		BROWNING-FERRIS INDUSTRIES INC	27.8750	5,575.00
1	200		CHIRON CORP	38.0000	7,600.00
1	200		GANNETT CO INC DEL	31.1250	6,225.00
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	8.6250	4,312.50
1	200		JAMES RIVER CORP OF VA	18.7500	3,750.00
1	200		PEPSICO INCORPORATED	24.0000	4,800.00
1	500		PICCADILLY CAFETERIAS	8.2500	4,125.00
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	26.6220	6,655.50
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT DY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00

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FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV 0Y-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	7,227.00
			VALUE OF PRICED SECURITIES		62,645.00

TO AVOID POSSIBLE FUTURE IRA INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST. RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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BECKLEY WV
25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$52,430.65		$20,815.94	$73,246.59

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	45.00CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	8,577.78	.00
GSP GOVT SEC PORTFOLIO	.00	20,815.94
TOTAL MONEY MARKET		20,815.94

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	550.00CR
CEF DIVIDENDS CREDITED	56.43CR	1,366.61CR
AVERAGE YIELD ON MONEY MARKET 10/16/90 TO 11/15/90		7.26%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 02	1	SALE	200-	AMERICAN TEL&TEL CO NEW	34.6250		6,785.80
11 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	45.00	
11 12	1	SALE	200-	CHIRON CORP	39.5000		7,758.86
11 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	6,785.80	
11 14	1	PURCHASE	100	BROWNING-FERRIS INDUSTRIES INC	23.3750	2,405.93	
11 16	1	DIVIDEND	56.43	REINVESTED DIVIDEND CEF AS OF 11/15/90			
11 20	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	5,350.93	
11 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	20,815.94	
11 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		20,815.94

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 8540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-8221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		BROWNING-FERRIS INDUSTRIES INC	21.1250	6,337.50
1	200		GANNETT CO INC DEL	34.8750	6,975.00
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	11.1250	5,562.50
1	300		JAMES RIVER CORP OF VA	22.8750	4,575.00
1	200		PEPSICO INCORPORATED	25.6250	5,125.00
1	500		PICCADILLY CAFETERIAS	8.6250	4,312.50
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	29.2210	7,305.25
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.2500	4,987.50
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0580	7,250.40
			VALUE OF PRICED SECURITIES		52,430.65

TO AVOID POSSIBLE FUTURE IRS INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM © WFSIC

Wheat First Securities Butcher & Singer

Wheat, First Securities, Inc.

707 East Main Street
Richmond VA, 23219
(804) 649-2311

November 9, 1990

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

RE: ACCT# 6540-0350

Dear Client,

On Wednesday, November 28th, we will be automatically transferring your money market balance from the Cash Equivalent Fund Money Market Portfolio to the Cash Equivalent Fund Government Securities Money Market Portfolio. The prospectus you previously received describes both portfolios and you may consult it for more information.

This transfer is being effected because the Government Securities Portfolio provides you with an extra margin of safety by investing in securities issued or guaranteed by the U.S. Government. The government guarantee of the securities owned by the Portfolio does not guarantee the net asset value of the Portfolio's shares, which the Portfolio seeks to maintain at $1.00 per share. Further, the seven day average yield on the Government Money Market Portfolio is comparable to the seven day average yield on your existing Money Market Portfolio. While this yield relationship may not always hold true, we believe the Government Portfolio provides you with the best combination of income and safety available in the Cash Equivalent Fund Portfolios.

In addition, we plan to enhance the features of our Government Securities Portfolio in January. We think the new services, including unlimited, no-minimum checking, will allow you to access your capital through one of the most competitive money market accounts offered today.

If you have any questions regarding this change, would like another copy of the prospectus, or for any reason you do not wish to take advantage of this transfer, please contact your Financial Consultant by Friday, November 23, 1990.

Sincerely,
Wheat First Securities/
Butcher & Singer

Wheat First Securities, Inc is the parent company of Butcher & Singer Inc Members New York Stock Exchange and SIPC

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
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25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$47,545.15	$45.38CR	$26,337.45	$73,927.98

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	45.38CR
NET CLOSING BALANCE		45.38CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	20,815.94	26,337.45
TOTAL MONEY MARKET		26,337.45

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	550.00CR
CEF DIVIDENDS CREDITED	45.38CR	1,411.99CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.17%
GSP DIVIDENDS CREDITED	155.64CR	155.64CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.03%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 06	1	SALE	200-	PEPSICO INCORPORATED	27.5000		5,385.87
12 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,385.87	
12 31	1	DIVIDEND		CEF-MONEY MKT PORTFOLIO			45.38
12 31	1	DIVIDEND	155.64	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		BROWNING-FERRIS INDUSTRIES INC	22.2500	6,675.00
1	200		GANNETT CO INC DEL	36.1250	7,225.00
1	500		GOLDEN VALLEY MICROWAVE FOODS INC	10.0000	5,000.00
1	200		JAMES RIVER CORP OF VA	26.2500	5,250.00
1	500		PICCADILLY CAFETERIAS	8.7500	4,375.00

---CONTINUED ON NEXT PAGE---

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	25000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	27.1290	6,782.25
1	35000		OAK RIDGE TENN INDL DEV 3RD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.2500	4,987.50
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0560	7,250.40
			VALUE OF PRICED SECURITIES		47,545.15
MF	1701.489		MFS GOVT INCOME PLUS TR (AS OF 12/21)	7.0300	11,961.32

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IT HAS BEEN A PLEASURE SERVING YOU IN 1990, AND WE WANT YOU TO KNOW THAT WE APPRECIATE YOUR BUSINESS. WE LOOK FORWARD TO SERVING YOU IN THE NEW YEAR, AND WE WILL DO EVERYTHING POSSIBLE TO MERIT THE CONFIDENCE YOU HAVE SHOWN IN US.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6540-1060	233-25-9977

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

#2

YOUR FINANCIAL CONSULTANT

EDWARD G RAHALL

121 MAIN STREET
BECKLEY, WEST VIRGINIA 25801

304-252-6221

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$21,606.35			$21,606.35

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	5000		FINANCING CRP SER 8 8/12 FICO STRIPS INT PMT ON 10.35% 8/3/18 DUE 8/03/12	13.3750	668.75
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	14.8590	2,971.80
1	50000		VESTAVIA HILLS ALA G.O. WTS DY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 28.080	20.5590	10,279.50
1	15000		VIRGINIA ST HSG DEV AUTH RES MTG NO PERIODIC PAY CAB 83A DY 9.90% EX CALL CPN 0.000% DUE 3/01/97 DTD 9/01/83 CALL 3/01/93 @ 69.950	51.2420	7,686.30
			VALUE OF PRICED SECURITIES		21,606.35
MF	111.950		SOUTHEASTERN GROWTH FUND (AS OF 3/23)	13.9100	1,557.22

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

SAFEGUARDING THE ENVIRONMENT IS EXPECTED TO BECOME AN IMPORTANT PART OF THE NATIONAL ECONOMY. NOW YOU CAN INVEST IN COMPANIES THAT ARE WELL-POSITIONED TO CAPITALIZE ON THIS BUSINESS THROUGH THE KEMPER ENVIRONMENTAL SERVICES FUND. ASK YOUR FINANCIAL CONSULTANT FOR DETAILS.

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
122 MAIN STREET BECKLEY, WEST VIRGINIA 25801
304-252-6221

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6540-1050	233-25-9977

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$22,156.95			$22,156.95

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	5000		FINANCING CRP SER 8 8/12 FICO STRIPS INT PMT ON 10.35% 8/3/18 DUE 8/03/12	14.3750	718.75
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	15.2660	3,053.20
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	21.0260	10,513.00
1	15000		VIRGINIA ST HSG DEV AUTH RES MTG NO PERIODIC PAY CAB 83A OY 9.90% EX CALL CPN 0.000% DUE 3/01/97 DTD 9/01/83 CALL 3/01/93 @ 69.980	52.4800	7,872.00
			VALUE OF PRICED SECURITIES		22,156.95
MF	111.950		SOUTHEASTERN GROWTH FUND (AS OF 6/28)	14.5400	1,627.75

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

WITH THE STOCK MARKET'S CLIMB DURING THE PAST SEVERAL MONTHS, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? NOW'S A GOOD TIME TO REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT. CALL TODAY TO SET UP AN APPOINTMENT.

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-8877	QUALITY INCOME/GROWTH	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$23,280.25			$23,280.25

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	5000		FINANCING CRP SER 8 8/12 FICO STRIPS INT PMT ON 10.35% 8/3/18 DUE 8/03/12	12.6250	631.25
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	16.9750	3,395.00
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	22.1610	11,080.50
1	15000		VIRGINIA ST HSG DEV AUTH RES MTG NO PERIODIC PAY CAB 83A OY 9.90% EX CALL CPN 0.000% DUE 3/01/97 DTD 9/01/83 CALL 3/01/93 @ 69.980	54.4900	8,173.50
			VALUE OF PRICED SECURITIES		23,280.25
MF	111.950		SOUTHEASTERN GROWTH FUND (AS OF 9/26)	11.5900	1,297.50

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

CURRENTLY, YOUR ACCOUNT'S INVESTMENT OBJECTIVE (EXPLAINED ON THE BACK) APPEARS ON EACH PAGE. IRAS NORMALLY SEEK "QUALITY INCOME" OR "QUALITY INCOME AND/OR GROWTH." OTHER OBJECTIVES REPRESENT UNUSUAL RISK FOR IRAS. FOR DETAILS, CALL YOUR FINANCIAL CONSULTANT.

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1060	233-25-9977	QUALITY INCOME/GROWTH	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
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110 1/2 MAIN ST
BECKLEY WV
25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$15,385.90		$3,217.51	$18,603.41

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	.00	3,217.51
TOTAL MONEY MARKET		3,217.51

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
GSP DIVIDENDS CREDITED	21.88CR	21.88CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.03%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 04	1	REDEMPTION	15000-	VIRGINIA ST HSG DEV AUTH RES MTG NO PERIODIC PAY CAB 83A OY 9.90% EX CALL CPN 0.000% DUE 3/01/97 DTD 9/01/83 CALL 3/01/93 @ 89.980			
12 04	1	REDEMPTION		VIRGINIA ST HSG DEV AUTH			8,202.45
12 05	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	8,202.45	
12 06	1	PURCHASE	546	MFS WORLDWIDE TOTAL ~ RETURN TRUST SBI AS OF 12/05/90	9.1700	5,006.82	
12 12	1	TO PLAN ACCT	546-	MFS WORLDWIDE TOTAL ~ RETURN TRUST SBI			
12 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,006.82
12 31	1	DIVIDEND	21.88	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	5000		FINANCING CRP SER 8 8/12 FICO STRIPS INT PMT ON 10.35% 8/3/18 DUE 8/03/12	15.0000	750.00

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FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 8540-1050	233-25-9977	QUALITY INCOME/GROWTH	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
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25801

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	17.0270	3,405.40
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	22.4610	11,230.50
			VALUE OF PRICED SECURITIES		15,385.90
MF	111.950		SOUTHEASTERN GROWTH FUND (AS OF 12/28)	12.4400	1,392.85

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---END OF STATEMENT---

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FORM -O 4P50 C

SHEARSON LEHMAN HUTTON

January 1 - January 28, 1990

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

#3

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800 232-4454

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to:

GERALD T ROLFE
BRANCH
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Money funds		$ 73,950.75
Stocks		429,512.50
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 503,463.25**
Net value last period	$ 550,134.94	

Earnings summary

	This period	This year Taxable	This year Non taxable
Interest	$ .27	$ .27	$ 0.00
Dividends	1,272.50	1,272.50	0.00
Money funds earnings	298.30	298.30	0.00
Total	**$ 1,571.07**	**$ 1,571.07**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 98 547 44
Securities bought and other subtractions		26 167 76	
Securities sold and other additions	0 00		
Interest credited	2		
Dividends credited	1 50		
Money funds earnings reinvested	30		
Total	$ 1 1 07	$ 26 167 76	
Combined closing cash and money funds balance			$ 73 950 75

Money funds 73 950 75

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01 26 90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	73 950 75	$ [illegible]		Annualized [illegible] $ 2
Total value of money funds		$ 73 950 75		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ALLTEL CORP	NYSE	1 500	$ 32 50	3 938%	$ 1 020 00	$ 48 750 00	Symbol AT Rated A
BOEING CO	NYSE	1 050	57 875	2 073	1 260 00	60 768 75	Symbol BA Rated B +
BRISTOL MYERS SQUIBB CO	NYSE	400	52 00	4 076	848 00	20 800 00	Symbol BMY Rated A +
BURLINGTON RES INC	NYSE	500	41 75	1 532	320 00	20 875 00	Symbol BR
CONTEL CORPORATION	NYSE	800	26 125	4 21	880 00	20 900 00	Symbol TC Rated A
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	54 875	1 275	35 00	2 743 75	Symbol GAP Rated B
ELI LILLY & CO	NYSE	600	61 875	2 65	984 00	37 125 00	Symbol [illegible]
LIN BROADCASTING CORP	OTC	50	104 00			5 200 00	Symbol LIN Rated B
MERCK & CO INC	NYSE	[illegible]	72 00	2 50	540 00	[illegible]	Symbol MRK Rated A +
PFIZER INC	NYSE	300	6 [illegible] 75	3 542	[illegible]	[illegible] 325 00	Symbol PFE Rated A +

January 1 - January 28, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	NYSE	1,000	$ 37.75	4.662%	$ 1,760.00	$ 37,750.00	Symbol SNG\Rated A
TOYS R US	NYSE	700	36.75			25,725.00	Symbol TOY\Rated B+
TYCO LABORATORIES INC	NYSE	800	43.375	7.37	250.00	34,700.00	Symbol TYC\Rated A-
UNOCAL CORP	NYSE	800	27.125	2.58	560.00	21,700.00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	1,200	42.125	.522	264.00	50,550.00	Symbol WMT\Rated A+
Total value of stocks					**$ 10,347.00**	**$ 429,512.50**	

Direct investments/insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTISDALE LAND TRUST L.P.	$ 20,000.00	Purchase date 09/20/88
Total direct investments/insurance	**$ 20,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
01/23/90	Bought	TOYS R US AVG PRICE SHOWN-DETAILS ON REQ	700	$ 36.923	$ -26,167.76
Total securities bought and other subtractions					**$ -26,167.76**
Total securities sold and other additions					**$ 0.00**

Other security activity

Date	Activity	Description	Quantity
01/23/90	Stk split	SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP STK SPLIT ON 500 SHS	500

Earnings details

The tax status of earnings is reliable to the best of our knowledge **Taxable** *and* **non-taxable** *designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non taxable	Comment	Amount
01/22/90	INTEREST ON CREDIT BALANCE AT 7.018% 12/29 THRU 1/21	$ 27			$ 27
Total interest earned		**$ 27**	**$ 0.00**		**$ 27**

Dividends

Date	Description	Taxable	Non taxable	Comment	Amount
01/02/90	BURLINGTON RES INC CASH DIV ON 500 SHS RECORD 12/15/89 PAY 01/02/90	$ 87.50			$ 87.50
01/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 12/08/89 PAY 01/02/90	135.00			135.00
01/02/90	TYCO LABORATORIES INC CASH DIV ON 800 SHS RECORD 12/05/89 PAY 01/02/90	64.00			64.00
01/02/90	WAL MART STORES INC CASH DIV ON 1200 SHS RECORD 12/11/89 PAY 01/02/90	66.00			66.00
01/03/90	ALLTEL CORP CASH DIV ON 1500 SHS RECORD 12/08/89 PAY 01/03/90	480.00			480.00
01/16/90	SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP CASH DIV ON 500 SHS RECORD 12/26/89 PAY 01/16/90	440.00			440.00
Total dividends earned		**$ 1,272.50**	**$ 0.00**		**$ 1,272.50**

Money funds earnings

Date	Description	Taxable	Non taxable	Comment	Amount
01/12/90	SLH DAILY DIVIDEND FUND	$ 298.30		Reinvested	$ 298.30
Total earnings from money funds		**$ 298.30**	**$ 0.00**		**$ 298.30**

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Money funds details

All transactions are traded at $1 00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 98,517 40
01/03/90	Autoinvest	SLH DAILY DIVIDEND FUND	352 54	352 54
01/04/90	Autoinvest	SLH DAILY DIVIDEND FUND	480 00	480 00
01/17/90	Autoinvest	SLH DAILY DIVIDEND FUND	440 00	440 00
01/23/90	Redemption	SLH DAILY DIVIDEND FUND	26,167 49	-26 167 49
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	298 30	298 30
	Closing money funds balance			**$ 73,950 75**

January 29 - February 25, 1990

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to

GERALD T ROLFE
BRANCH
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
U/A/D 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

Account value

Cash balance		$ 14
Money funds		54,119 03
Stocks		445,125 00
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 499 244 17**
Net value last period	$ 503,463 25	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 14	$ 41	$ 0 00
Dividends	360 75	1,633 25	0 00
Money funds earnings	537 77	836 07	0 00
Total	**$ 898 66**	**$ 2,469 73**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant

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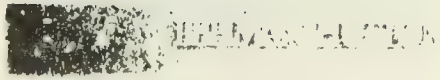

Client Statement
January 29 - February 25, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 73,950 75**
Securities bought and other subtractions		-20,730 24	
Securities sold and other additions	0 00		
Interest credited	14		
Dividends credited	360.75		
Money funds earnings credited	47.13		
Money funds earnings reinvested	490 64		
Total	$ 898 66	$ -20,730.24	
Combined closing cash and money funds balance			**$ 54,119 17**

Cash	14
Money funds	54,119 03

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 02/23/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	54,119 03	$ 54,119 03	7 512%	Accrued dividends of $ 126 69
Total value of money funds		**$ 54,119.03**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ALLTEL CORP	NYSE	1,500	$ 31 125	4 112%	$ 1,920.00	$ 46,687 50	Symbol: AT\Rated: A
BOEING CO	NYSE	1,050	60 00	2 00	1,260 00	63,000 00	Symbol: BA\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	400	51 00	4 156	848 00	20,400 00	Symbol: BMY\Rated: A+
BURLINGTON RES INC	NYSE	500	42 50	1 505	320 00	21,250 00	Symbol: BR
CHEVRON CORP	NYSE	300	66 875	4 186	840 00	20 062 50	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	800	26 125	4 21	880 00	20,900 00	Symbol CTC\Rated: A-
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	50.125	1.396	35 00	2,506 25	Symbol. GAP\Rated: B

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ELI LILLY & CO	NYSE	600	$ 59 125	2 773%	$ 984 00	$ 35 475 00	Symbol LLY\Rated A+
LIN BROADCASTING CORP	OTC	50	108 875			5,443 75	Symbol LINB\Rated B+
MERCK & CO INC	NYSE	300	68 00	2 647	540 00	20,400 00	Symbol MRK\Rated A+
PFIZER INC	NYSE	300	56 25	4 266	720 00	16 875 00	Symbol PFE\Rated A+
SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	NYSE	1,000	37 875	4 646	1,760 00	37,875 00	Symbol SNG\Rated A
TOYS R US	NYSE	700	36 00			25 200 00	Symbol TOY\Rated B+
TYCO LABORATORIES INC	NYSE	800	45 625	701	256 00	36 500 00	Symbol TYC\Rated A-
UNOCAL CORP	NYSE	800	29 75	2 352	560 00	23 800 00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	1,200	40 625	541	264 00	48 750 00	Symbol WMT\Rated A+
Total value of stocks					**$ 11,187 00**	**$ 445,125 00**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping It reflects purchases through Shearson Lehman Hutton or information supplied to us Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20 000 00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
02/15/90	Bought	CHEVRON CORP AVG PRICE SHOWN-DETAILS ON REQ	300	$ 68 379	$ -20,730 24
Total securities bought and other subtractions					$ 20 730 24
Total securities sold and other additions					$ 0 00

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January 29 - February 25, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/90	INTEREST ON CREDIT BALANCE AT 7.722% 1/22 THRU 2/20	$ .14			$ .14
Total interest earned		**$ .14**	**$ 0.00**		**$ .14**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 400 SHS RECORD 01/05/90 PAY 02/01/90	$ 212.00			$ 212.00
02/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 50 SHS RECORD 01/12/90 PAY 02/01/90	8.75			8.75
02/09/90	UNOCAL CORP CASH DIV ON 800 SHS RECORD 01/10/90 PAY 02/09/90	140.00			140.00
Total dividends earned		**$ 360.75**	**$ 0.00**		**$ 360.75**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	SLH DAILY DIVIDEND FUND	$ 490.30		Reinvested	$ 490.30
02/09/90	SLH GOVERNMENT AND AGENCIES FUND	.34		Reinvested	.34
02/14/90	SLH DAILY DIVIDEND FUND CASH DIV	47.13		Credited to account	47.13
Total money funds earnings credited to account					**$ 47.13**
Total money funds earnings reinvested					**$ 490.64**
Total earnings from money funds		**$ 537.77**	**$ 0.00**		**$ 537.77**

January 29 - February 25, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds details

Money funds activity

All transactions are traded at $1 00 per share

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 73,950 75**
02/02/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	220 75	220 75
02/12/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	140 00	140 00
02/14/90	Redemption	SLH DAILY DIVIDEND FUND EXCHANGE REDEMPTION	74,441 05	-74,441 05
02/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	74 488 18	74,488 18
02/15/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	20,730 24	-20,730 24
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	490 64	490 64
	Closing money funds balance			**$ 54,119 03**

[redacted] March

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
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Account number 685-08087-15 240
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Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Money funds		$ 37,853.85
Stocks		499,019.00
Direct Investments/Insurance		*(see Portfolio details)*
Net value this period		**$ 536,872.85**
Net value last period	**$ 499,244.17**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 1.11	$ 1.52	$ 0.00
Dividends	961.00	2,594.25	0.00
Money funds earnings	282.99	1,119.06	0.00
Total	**$ 1,245.10**	**$ 3,714.83**	**$ 0.00**

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Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 54,119.17**
Securities bought and other subtractions		-21,209.06	
Securities sold and other additions	3,698.64		
Interest credited	1.11		
Dividends credited	961.00		
Money funds earnings reinvested	282.99		
Total	$ 4,943.74	$ -21,209.06	
Combined closing cash and money funds balance			**$ 37,853.85**

Money funds	37,853.85

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/30/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	37,853.85	$ 37,853.85	7.492%	Accrued dividends of $ 228.83
Total value of money funds		**$ 37,853.85**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
ALLTEL CORP	NYSE	1,500	$ 32.50	3.938%	$ 1,920.00	$ 48,750.00	Symbol: AT\Rated: A
BOEING CO	NYSE	1,050	71.75	1.672	1,260.00	75,337.50	Symbol: BA\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	400	53.25	3.981	848.00	21,300.00	Symbol: BMY\Rated: A+
BROWNING-FERRIS INDUSTRIES INC	NYSE	600	36.50	1.753	384.00	21,900.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	500	39.625	1.615	320.00	19,812.50	Symbol: BR
CHEVRON CORP	NYSE	300	67.50	4.148	840.00	20,250.00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	800	28.50	3.859	880.00	22,800.00	Symbol: CTC\Rated: A-
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	53.00	1.32	35.00	2,650.00	Symbol: GAP\Rated: B+
ELI LILLY & CO	NYSE	600	64.625	2.537	984.00	38,775.00	Symbol: LLY\Rated: A+

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Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
LIN BROADCASTING CORP	OTC	26	$ 81.50			$ 2,119.00	Symbol: LINB\Rated: B+
MERCK & CO INC	NYSE	300	69.50	2.589	540.00	20,850.00	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	300	60.625	3.958	720.00	18,187 50	Symbol: PFE\Rated: A+
SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	NYSE	1,000	38.00	4.631	1,760.00	38,000.00	Symbol: SNG\Rated: A
TOYS R US	NYSE	700	40.125			28,087.50	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	47.50	.673	256.00	38,000.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	31.875	2.196	560.00	25,500.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	1,200	47.25	.592	336.00	56,700.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 11,643.00**	**$ 499,019.00**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
03/14/90	Tender	LIN BROADCASTING CORP	24		$ 3,698 64
03/27/90	Bought	BROWNING-FERRIS INDUSTRIES INC	600	34.875	-21,209 06
Total securities bought and other subtractions					**$ -21,209 06**
Total securities sold and other additions					**$ 3,698.64**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
03/21/90	INTEREST ON CREDIT BALANCE AT 7.845% 2/21 THRU 3/20	$ 1.11			$ 1.11
Total interest earned		**$ 1.11**	**$ 0.00**		**$ 1.11**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/28/90	CONTEL CORPORATION CASH DIV ON 800 SHS RECORD 02/16/90 PAY 02/28/90	$ 220.00			$ 220.00
03/09/90	BOEING CO CASH DIV ON 1050 SHS RECORD 02/16/90 PAY 03/09/90	315.00			315.00
03/12/90	ELI LILLY & CO CASH DIV ON 600 SHS RECORD 02/15/90 PAY 03/10/90	246.00			246.00
03/22/90	PFIZER INC CASH DIV ON 300 SHS RECORD 02/09/90 PAY 03/22/90	180.00			180.00
Total dividends earned		**$ 961.00**	**$ 0.00**		**$ 961.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
03/09/90	SLH GOVERNMENT AND AGENCIES FUND	$ 282.99		Reinvested	$ 282.99
Total earnings from money funds		**$ 282.99**	**$ 0.00**		**$ 282.99**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 54,119.03**
03/01/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	220.14	220.14

Account number 685-08087-15 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
03/12/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	315.00	$ 315.00
03/13/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	246.00	246.00
03/15/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	3,698.64	3,698.64
03/15/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	3,698.64	3,698.64
03/15/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	3,698.64	-3,698.64
03/23/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	181.11	181.11
03/27/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	21,209.06	-21,209.06
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	282.99	282.99
	Closing money funds balance			$ 37,853.88

SHEARSON LEHMAN HUTTON

Preferred Client Statement
April 1 - April 29, 1990

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-08087-15 240
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Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Money funds		$ 4,122.20
Stocks		489,332 13
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 493,454.33**
Net value last period	**$ 636,872 85**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 36	$ 1 88	$ 0 00
Dividends	1,290 50	3,884 75	0 00
Money funds earnings	362 98	1,482 04	0 00
Total	$ 1,653.84	$ 5,368 67	$ 0 00

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SHEARSON LEHMAN HUTTON

Preferred Client Statement

April 1 - April 29, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 37,853.85**
Securities bought and other subtractions		-22,894.20	
Securities sold and other additions	17,508.71		
Withdrawals		-30,000.00	
Interest credited	.36		
Dividends credited	1,290.50		
Money funds earnings credited	23.59		
Money funds earnings reinvested	339.39		
Total	$ 19,162.55	$ -52,894.20	
Combined closing cash and money funds balance			**$ 4,122.20**

Money funds	4,122.20

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/27/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	4,122.20	$ 4,122.20	7.477%	Accrued dividends of $ 2.51
Total value of money funds		**$ 4,122.20**		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
ALLTEL CORP	NYSE	1,500	$ 31.125	4.112%	$ 1,920.00	$ 46,687.50	Symbol: AT\Rated: A
BOEING CO	NYSE	1,050	68.75	1.745	1,260.00	72,187.50	Symbol: BA\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	400	55.125	3.845	848.00	22,050.00	Symbol: BMY\Rated: A+
BROWNING-FERRIS INDUSTRIES INC	NYSE	600	36.125	1.771	384.00	21,675.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	500	40.875	1.639	335.00	20,437.50	Symbol: BR
CHEVRON CORP	NYSE	300	65.125	4.299	840.00	19,537.50	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	800	23.875	4.607	880.00	19,100.00	Symbol: CTC\Rated: A-

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Stocks
continued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
WALT DISNEY COMPANY	NYSE	200	$ 109.625	.529%	$ 116.00	$ 21,925.00	Symbol: DIS\Rated: B+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	53.00	1.32	35.00	2,650.00	Symbol: GAP\Rated: B+
ELI LILLY & CO	NYSE	600	65.625	2.499	984.00	39,375.00	Symbol: LLY\Rated: A+
LIN BROADCASTING CORP	OTC	26	61.875			1,608.75	Symbol: LINB\Rated: B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	24.875			323.38	Symbol: MCAWA
MERCK & CO INC	NYSE	300	72.25	2.491	540.00	21,675.00	Symbol: MRK\Rated: A+
SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	NYSE	1,000	35.625	4.94	1,760.00	35,625.00	Symbol: SNG\Rated: A
TOYS R US	NYSE	700	39.75			27,825.00	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	45.25	.707	256.00	36,200.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	28.00	2.50	560.00	22,400.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	1,200	48.375	.578	336.00	58,050.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 11,054.00**	**$ 489,332.13**	

Direct investments/insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

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SHEARSON LEHMAN HUTTON

An American Express company

Preferred Client Statement

Page 8 of

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
04/11/90	Spinoff	MCCAW CELLULAR COMMUNICATIONS INC CL A SPINOFF ON 26 SHS RECORD 03/20/90 PAY 04/03/90	13		$ 0.00
04/11/90	Cashinlieu	MCCAW CELLULAR COMMUNICATIONS INC CL A CASH IN LIEU OF .92274 RECORD 03/20/90 PAY 04/03/90			25.60
04/12/90	Bought	WALT DISNEY COMPANY	200	113.75	-22,894.20
04/25/90	Sold	PFIZER INC	300	59.00	17,483.11
Total securities bought and other subtractions					**$ -22,894.20**
Total securities sold and other additions					**$ 17,508.71**

Withdrawals

Date	Description	Reference no	Amount
04/20/90	CHECK PAID BY STROUDSBURG, PA	68509292	**$ 30,000.00**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable and non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
04/23/90	INTEREST ON CREDIT BALANCE AT 7.824% 3/21 THRU 4/22	$ .36			$ .36
Total interest earned		**$ .36**	**$ 0.00**		**$ .36**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
04/02/90	BURLINGTON RES INC CASH DIV ON 500 SHS RECORD 03/16/90 PAY 04/02/90	$ 87.50			$ 87.50
04/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 03/09/90 PAY 04/02/90	135.00			135.00

3400

Account number 685-08087-15 240

Dividends
continued

Date	Description	Taxable	Non-taxable	Comment	Amount
04/02/90	TYCO LABORATORIES INC CASH DIV ON 800 SHS RECORD 03/06/90 PAY 04/02/90	$ 64.00			$ 64.00
04/03/90	ALLTEL CORP CASH DIV ON 1500 SHS RECORD 03/09/90 PAY 04/03/90	480.00			480.00
04/09/90	WAL-MART STORES INC CASH DIV ON 1200 SHS RECORD 03/23/90 PAY 04/09/90	84.00			84.00
04/16/90	SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP CASH DIV ON 1000 SHS RECORD 03/26/90 PAY 04/16/90	440.00			440.00
Total dividends earned		**$ 1,290.50**	**$ 0.00**		**$ 1,290.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
04/12/90	SLH GOVERNMENT AND AGENCIES FUND	$ 339.39		Reinvested	$ 339.39
04/20/90	SLH GOVERNMENT AND AGENCIES FUND ACCRUED DIVIDEND	23.59		Credited to account	23.59
Total money funds earnings credited to account					**$ 23.59**
Total money funds earnings reinvested					**$ 339.39**
Total earnings from money funds		**$ 362.98**	**$ 0.00**		**$ 362.98**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 37,853.85**
04/03/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	286.50	286.50
04/04/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	480.00	480.00
04/12/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	109.60	109.60

SHEARSON LEHMAN HUTTON

An American Express company

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
04/12/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	22,894.20	$ -22,894.20
04/17/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	440.00	440.00
04/20/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	12,516.89	-12,516.89
04/20/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	4,098.25	-4,098.25
04/26/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	4,122.20	4,122.20
04/26/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	4,122.20	4,122.20
04/26/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	4,122.20	-4,122.20
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	339.39	339.39
	Closing money funds balance			**$ 4,122 20**

LEHMAN HUTTON

April 30 - May 27, 1990

Tax Id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to:

GERALD T. ROLFE
BRANCH
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance	$ 13.60
Money funds	4,497.67
Stocks	541,387.50
Direct investments/insurance	*(see Portfolio details)*
Net value this period	**$ 545,898.77**
Net value last period	**$ 493,454.33**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .99	$ 2.87	$ 0.00
Dividends	389.75	4,274.50	0.00
Money funds earnings	14.72	1,496.76	0.00
Total	**$ 405.46**	**$ 5,774.13**	**$ 0.00**

3403

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 4,122.20**
	Amounts added	Amounts subtracted	
Withdrawals		-16 39	
Interest credited	.99		
Dividends credited	389 75		
Money funds earnings reinvested	14 72		
Total	$ 405 46	$ -16 39	
Combined closing cash and money funds balance			**$ 4,511 27**

Cash	13 60
Money funds	4,497.67

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 05/25/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	4,497 67	$ 4,497 67	7 414%	Accrued dividends of $ 13 68
Total value of money funds		**$ 4,497.67**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ALLTEL CORP	NYSE	1,500	$ 33 50	3 82%	$ 1,920 00	$ 50,250 00	Symbol: AT\Rated: A
BOEING CO	NYSE	1,050	81.75	1 834	1,575.00	85,837 50	Symbol: BA\Rated. A-
BRISTOL MYERS SQUIBB CO	NYSE	400	60.75	3 489	848.00	24,300.00	Symbol: BMY\Rated: A+
BROWNING-FERRIS INDUSTRIES INC	NYSE	600	41 00	1 56	384 00	24,600 00	Symbol: BFI\Rated. A+
BURLINGTON RES INC	NYSE	500	41 125	1 629	335 00	20,562 50	Symbol: BR
CHEVRON CORP	NYSE	300	67 75	4 132	840 00	20,325.00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	800	28 00	3 928	880 00	22,400 00	Symbol: CTC\Rated. A-
WALT DISNEY COMPANY	NYSE	200	117 625	493	116 00	23,525.00	Symbol: DIS\Rated: B+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	56.875	1 23	35.00	2,843.75	Symbol: GAP\Rated: B+

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ELI LILLY & CO	NYSE	600	$ 75 50	2 172%	$ 984 00	$ 45,300 00	Symbol LLY\Rated A +
LIN BROADCASTING CORP	OTC	26	70 25			1,826 50	Symbol: LINB\Rated. B +
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	28 25			367 25	Symbol. MCAWA
MERCK & CO INC	NYSE	300	84.00	2 142	540 00	25,200 00	Symbol: MRK\Rated: A +
SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	NYSE	1,000	34 75	5.064	1,760 00	34,750.00	Symbol: SNG\Rated: A
TOYS R US	NYSE	700	44.50			31,150 00	Symbol. TOY\Rated B +
TYCO LABORATORIES INC	NYSE	800	48 25	.663	256 00	38,600 00	Symbol TYC\Rated: A-
UNOCAL CORP	NYSE	800	29 25	2.393	560 00	23,400 00	Symbol UCL\Rated: B
WAL-MART STORES INC	NYSE	1,200	55.125	.507	336 00	66,150 00	Symbol. WMT\Rated: A +
Total value of stocks					**$ 11,369.00**	**$ 541,387.50**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping It reflects purchases through Shearson Lehman Hutton or information supplied to us Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20 000 00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000 00**	

Transaction details

Withdrawals

Date	Description	Reference no	Amount
05/15/90	TO ADJUST BALANCE PREPAYMENT CHARGE 4/90		$ 16 39

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Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
05/21/90	INTEREST ON CREDIT BALANCE AT 7 788% 4/23 THRU 5/20	$ .99			$ .99
Total interest earned		**$ .99**	**$ 0.00**		**$ .99**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 400 SHS RECORD 04/06/90 PAY 05/01/90	$ 212.00			$ 212.00
05/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 50 SHS RECORD 04/12/90 PAY 05/01/90	8.75			8.75
05/10/90	UNOCAL CORP CASH DIV ON 800 SHS RECORD 04/10/90 PAY 05/10/90	140 00			140 00
05/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 04/13/90 PAY 05/15/90	29 00			29 00
Total dividends earned		**$ 389.75**	**$ 0.00**		**$ 389 75**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
05/11/90	SLH GOVERNMENT AND AGENCIES FUND	$ 14.72		Reinvested	$ 14.72
Total earnings from money funds		**$ 14.72**	**$ 0.00**		**$ 14.72**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 4,122.20**
05/02/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	220 75	220.75

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Money funds activity
continued

Date	Activity	Description	Quantity	Amount
05/11/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	140.00	$ 140 00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	14.72	14 72
	Closing money funds balance			**$ 4,497 67**

SHEARSON LEHMAN HUTTON

An American Express company

Tax id number 55-6085192

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-08087-15 240

As you requested, copies of this statement have also been sent to

GERALD T. ROLFE
BRANCH
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Money funds		$ 89,984 95
Stocks		489,145 50
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 579,130.45**
Net value last period	**$ 545,898 77**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .43	$ 3 30	$ 0 00
Dividends	1,069 75	5,344.25	0 00
Money funds earnings	25 94	1,522 70	0 00
Total	**$ 1,096 12**	**$ 6,870.25**	**$ 0 00**

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SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 4,511.27**
Securities bought and other subtractions		0.00	
Securities sold and other additions	84,377.56		
Interest credited	.43		
Dividends credited	1,069.75		
Money funds earnings reinvested	25.94		
Total	$ 85,473.68	$ 0.00	
Combined closing cash and money funds balance			**$ 89,984.95**

Money funds	89,984.95

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 06/29/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	89,984.95	$ 89,984.95	7.409%	Accrued dividends of $ 92.21
Total value of money funds		**$ 89,984.95**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	1,575	$ 58.50	1.709%	$ 1,575.00	$ 92,137.50	Symbol BA\Rated A-
BRISTOL MYERS SQUIBB CO	NYSE	400	63.375	3.345	848.00	25,350.00	Symbol BMY\Rated A+
BROWNING FERRIS INDUSTRIES INC	NYSE	600	44.375	1.442	384.00	26,625.00	Symbol BFI\Rated A+
BURLINGTON RES INC	NYSE	500	41.875	1.60	335.00	20,937.50	Symbol BR
CHEVRON CORP	NYSE	300	70.375	3.978	840.00	21,112.50	Symbol CHV\Rated B+
CONTEL CORPORATION	NYSE	800	25.75	4.271	880.00	20,600.00	Symbol CTC\Rated A-
WALT DISNEY COMPANY	NYSE	200	128.25	.452	116.00	25,650.00	Symbol DIS\Rated B+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	57.125	1.225	35.00	2,856.25	Symbol GAP\Rated B+
ELI LILLY & CO	NYSE	600	83.125	1.972	984.00	49,875.00	Symbol: LLY\Rated: A+

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SHEARSON LEHMAN HUTTON

An American Express company

Account number 685-08087-15 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
LIN BROADCASTING CORP	OTC	26	$ 74.00			$ 1,924.00	Symbol: LINB\Rated: B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	24.25			315.25	Symbol: MCAWA
MERCK & CO INC	NYSE	300	86.75	2.074	540.00	26,025.00	Symbol: MRK\Rated: A+
TOYS R US	NYSE	700	48.125			33,687.50	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	56.875	.562	256.00	45,500.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	27.125	2.58	560.00	21,700.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	1,200	62.375	.448	336.00	74,850.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 7,689.00**	**$ 489,145.50**	

Direct Investments/ Insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
06/18/90	Stk split	BOEING CO STK SPLIT ON 1050 SHS	525		$ 0.00
06/26/90	Sold	ALLTEL CORP	-1,500	34.00	50,514.18
06/26/90	Sold	SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP	-1,000	34.25	33,863.38
Total securities bought and other subtractions					**$ 0.00**
Total securities sold and other additions					**$ 84,377.56**

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SHEARSON LEHMAN HUTTON

An American Express Company

Account number 685-08087-15 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
06/21/90	INTEREST ON CREDIT BALANCE AT 7.738% 5/21 THRU 6/20	$ .43			$ .43
Total interest earned		**$ .43**	**$ 0.00**		**$ .43**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/31/90	CONTEL CORPORATION CASH DIV ON 800 SHS RECORD 05/15/90 PAY 05/31/90	$ 220.00			$ 220.00
06/08/90	BOEING CO CASH DIV ON 1050 SHS RECORD 05/18/90 PAY 06/08/90	393.75			393.75
06/11/90	CHEVRON CORP CASH DIV ON 300 SHS RECORD 05/07/90 PAY 06/11/90	210.00			210.00
06/11/90	ELI LILLY & CO CASH DIV ON 600 SHS RECORD 05/15/90 PAY 06/09/90	246.00			246.00
Total dividends earned		**$ 1,069.75**	**$ 0.00**		**$ 1,069.75**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
06/08/90	SLH GOVERNMENT AND AGENCIES FUND	$ 25.94		Reinvested	$ 25.94
Total earnings from money funds		**$ 25.94**	**$ 0.00**		**$ 25.94**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 4,497.67
06/01/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	233.60	233.60

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SHEARSON LEHMAN HUTTON

An American Express company

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
06/11/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	393.75	$ 393.75
06/12/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	456.00	456.00
06/27/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	84,377.99	84,377.99
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	25.94	25.94
	Closing money funds balance			**$ 89,984.95**

[redacted]

July 1 - July 29, 1990

Tax Id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to:

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Preferred client service center: 1-800-232-4454

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 18.61
Money funds		91,721.69
Stocks		496,554 00
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 588,294.30**
Net value last period	**$ 579,130 45**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 18.61	$ 21.91	$ 0.00
Dividends	1,386.50	6,730.75	0.00
Money funds earnings	350 24	1,872.94	0.00
Total	**$ 1,755.35**	**$ 8,625.60**	**$ 0.00**

LEHMAN BROTHERS

July 1 - July 29, 1990

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 89,984.95**
Securities bought and other subtractions		0.00	
Securities sold and other additions	0.00		
Interest credited	18.61		
Dividends credited	1,386 50		
Money funds earnings reinvested	350.24		
Total	$ 1,755.35	$ 0.00	
Combined closing cash and money funds balance			**$ 91,740.30**

Cash	18 61
Money funds	91,721 69

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/27/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	91,721 69	$ 91,721 69	7 377%	Accrued dividends of $ 256 82
Total value of money funds		**$ 91,721.69**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BOEING CO	NYSE	1,575	$ 59.25	1.687%	$ 1,575.00	$ 93,318.75	Symbol: BA\Rated: A-
BRISTOL MYERS SQUIBB CO	NYSE	400	63.125	3.358	848.00	25,250.00	Symbol: BMY\Rated. A+
BROWNING FERRIS INDUSTRIES INC	NYSE	600	40.75	1.57	384.00	24,450.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	500	44.375	1.577	350.00	22,187.50	Symbol: BR
CHEVRON CORP	NYSE	300	77 25	4.012	930 00	23,175 00	Symbol: CHV\Rated: B+
CONTEL CORPORATION	NYSE	800	33 125	3.32	880.00	26,500 00	Symbol: CTC\Rated: A-
WALT DISNEY COMPANY	NYSE	200	116.00	.50	116.00	23,200.00	Symbol: DIS\Rated: B+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	56.375	1.419	40.00	2,818.75	Symbol: GAP\Rated: B+

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
ELI LILLY & CO	NYSE	600	$ 80.50	2.037%	$ 984.00	$ 48,300 00	Symbol: LLY\Rated: A+
LIN BROADCASTING CORP	OTC	26	70.00			1,820 00	Symbol LINB\Rated: B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	24.25			315.25	Symbol: MCAWA
MERCK & CO INC	NYSE	300	88.25	2.538	672.00	26,475.00	Symbol: MRK\Rated: A+
TOYS R US	NYSE	1,050	29 375			30,843 75	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	59.625	.536	256.00	47,700 00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	30.375	2.304	560.00	24,300.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	2,400	31.625	.442	336 00	75,900.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 7,931.00**	**$ 495,554.00**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/10/90	Stk split	TOYS R US STK SPLIT ON 700 SHS	350		$ 0.00
07/16/90	Stk split	WAL-MART STORES INC STK SPLIT ON 1200 SHS	1,200		0.00
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 0 00**

3415

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
07/23/90	INTEREST ON CREDIT BALANCE AT 7.736% 6/21 THRU 7/22	$ 18.61			$ 18.61
Total interest earned		**$ 18.61**	**$ 0.00**		**$ 18.61**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
07/02/90	BURLINGTON RES INC CASH DIV ON 500 SHS RECORD 06/15/90 PAY 07/02/90	$ 87.50			$ 87.50
07/02/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 06/04/90 PAY 07/02/90	135.00			135.00
07/02/90	TYCO LABORATORIES INC CASH DIV ON 800 SHS RECORD 06/05/90 PAY 07/02/90	64.00			64.00
07/03/90	ALLTEL CORP CASH DIV ON 1500 SHS RECORD 06/08/90 PAY 07/03/90	480.00			480.00
07/06/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 600 SHS RECORD 06/22/90 PAY 07/06/90	96.00			96.00
07/06/90	WAL-MART STORES INC CASH DIV ON 1200 SHS RECORD 06/15/90 PAY 07/06/90	84.00			84.00
07/16/90	SOUTHERN NEW ENGLAND TELECOMMUNICATIONS CORP CASH DIV ON 1000 SHS RECORD 06/25/90 PAY 07/16/90	440.00			440.00
Total dividends earned		**$ 1,386.50**	**$ 0.00**		**$ 1,386.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
07/13/90	SLH GOVERNMENT AND AGENCIES FUND	$ 350.24		Reinvested	$ 350.24
Total earnings from money funds		**$ 350.24**	**$ 0.00**		**$ 350.24**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 89,984.95**
07/03/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	286.50	286.50
07/05/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	480.00	480.00
07/09/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	180.00	180.00
07/17/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	440.00	440.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	350.24	350.24
	Closing money funds balance			**$ 91,721.69**

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08087-15 [illegible]
As you requested, copies of this statement have also been sent to:

GERALD T. ROLFE
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 39.45
Money funds		240,696.54
Stocks		305,987.75
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 546,723.74**
Net value last period	$ 588,294.30	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 39.45	$ 61.36	$ 0.00
Dividends	391.00	7,121.75	0.00
Money funds earnings	513.18	2,386.12	0.00
Total	**$ 943.63**	**$ 9,569.23**	**$ 0.00**

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 91,740 30**
Securities bought and other subtractions		0 00	
Securities sold and other additions	148,052 06		
Interest credited	39 45		
Dividends credited	391 00		
Money funds earnings reinvested	513 18		
Total	$ 148,995.69	$ 0.00	
Combined closing cash and money funds balance			**$ 240,735 99**

Cash	39.45
Money funds	240,696.54

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	240,696 54	$ 240,696.54	7.271%	Accrued dividends of $ 990 64
Total value of money funds		**$ 240,696.54**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	400	$ 60 875	3.482%	$ 848.00	$ 24,350 00	Symbol: BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	600	37.875	1.689	384 00	22,725 00	Symbol BFI
BURLINGTON RES INC	NYSE	500	44.50	1 573	350 00	22,250 00	Symbol. BR
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	50 50	1.584	40.00	2,525 00	Symbol: GAP
ELI LILLY & CO	NYSE	600	75.125	2.183	984 00	45,075.00	Symbol: LLY
LIN BROADCASTING CORP	OTC	26	54.00			1,404.00	Symbol. LINB
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	17.50			227.50	Symbol: MCAWA

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
MERCK & CO INC	NYSE	300	$ 81.625	2.744%	$ 672.00	$ 24,487.50	Symbol: MRK
TOYS R US	NYSE	1,050	25.375			26,643.75	Symbol: TOY
TYCO LABORATORIES INC	NYSE	800	52.875	.605	256.00	42,300.00	Symbol: TYC
UNOCAL CORP	NYSE	800	32.00	2.187	560.00	25,600.00	Symbol: UCL
WAL-MART STORES INC	NYSE	2,400	28.50	.491	336.00	68,400.00	Symbol: WMT
Total value of stocks					**$ 4,430.00**	**$ 305,987.75**	

Direct Investments/ Insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
08/10/90	Sold	WALT DISNEY COMPANY AVG PRICE SHOWN-DETAILS ON REQ AS OF 08/03/90	-200	$ 107.603	$ 21,375.72
08/13/90	Sold	BOEING CO AVG PRICE SHOWN-DETAILS ON REQ	-1,575	51.229	80,072.42
08/13/90	Sold	CONTEL CORPORATION AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 30.33483000	-800	30.334	23,948.63
08/15/90	Sold	CHEVRON CORP AVG PRICE SHOWN-DETAILS ON REQ	-300	76.241	22,655.29
Total securities bought and other subtractions					**$ 0.00**
Total securities sold and other additions					**$ 148,052.06**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
08/21/90	INTEREST ON CREDIT BALANCE AT 7.408% 7/23 THRU 8/20	$ 39.45			$ 39 45
Total interest earned		**$ 39.45**	**$ 0.00**		**$ 39 45**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
08/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 400 SHS RECORD 07/06/90 PAY 08/01/90	$ 212.00			$ 212.00
08/06/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 50 SHS RECORD 07/20/90 PAY 08/06/90	10.00			10.00
08/10/90	UNOCAL CORP CASH DIV ON 800 SHS RECORD 07/10/90 PAY 08/10/90	140.00			140.00
08/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 07/13/90 PAY 08/15/90	29.00			29.00
Total dividends earned		**$ 391.00**	**$ 0.00**		**$ 391.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
08/10/90	SLH GOVERNMENT AND AGENCIES FUND	$ 513.18		Reinvested	$ 513 18
Total earnings from money funds		**$ 513.18**	**$ 0.00**		**$ 513 18**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 91,721 69
08/02/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	230.61	230 61

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
08/13/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	21,525.72	$ 21,525.72
08/14/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	104,021.05	104,021.05
08/14/90	Investment	SLH GOVERNMENT AND AGENCIES FUND	104,021.05	104,021.05
08/14/90	Redemption	SLH GOVERNMENT AND AGENCIES FUND	104,021.05	-104,021.05
08/16/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	22,684.29	22,684.29
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	513.18	513.18
	Closing money funds balance			**$ 240,696.54**

Tax Id number 55-6085192

Your Financial Consultant

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Account number 685-08087-15 240

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EDWARD GEORGE RAHALL TRUSTEE
U/A/D 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 27
Money funds		242,827 13
Stocks		287,843 00
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 530 670.40**
Net value last period	**$ 546,723 74**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ 27	$ 61 63	$ 0 00
Dividends	478 50	7,600 25	0 00
Money funds earnings	1,612 64	3,998 76	0 00
Total	**$ 2,091 41**	**$ 11,660 64**	**$ 0 00**

3423

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 240,735 89**
Interest credited	.27		
Dividends credited	478.50		
Money funds earnings reinvested	1,612.64		
Total	$ 2,091.41	$ 0.00	
Combined closing cash and money funds balance			**$ 242,827 40**

Cash	.27
Money funds	242,827.13

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/28/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH GOVERNMENT AND AGENCIES FUND	242,827.13	$ 242,827.13	7.244%	Accrued dividends of $ 673.84
Total value of money funds		**$ 242,827.13**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	400	$ 57 75	3.67%	$ 848 00	$ 23,100 00	Symbol: BMY
BROWNING FERRIS INDUSTRIES INC	NYSE	600	30 75	2 081	384 00	18,450 00	Symbol: BFI
BURLINGTON RES INC	NYSE	500	44.75	1.564	350 00	22,375.00	Symbol: BR
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	46.125	1 734	40 00	2,306.25	Symbol: GAP
ELI LILLY & CO	NYSE	600	71.50	2.293	984.00	42,900.00	Symbol LLY
LIN BROADCASTING CORP	OTC	26	45.25			1,176 50	Symbol. LINB
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	14 25			185.25	Symbol: MCAWA
MERCK & CO INC	NYSE	300	76.125	2 942	672.00	22,837.50	Symbol: MRK
TOYS R US	NYSE	1,050	23 25			24,412.50	Symbol. TOY

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
TYCO LABORATORIES INC	NYSE	800	$ 49.875	641%	$ 256.00	$ 39,900.00	Symbol: TYC
UNOCAL CORP	NYSE	800	31.00	2.258	560.00	24,800.00	Symbol: UCL
WAL-MART STORES INC	NYSE	2,400	27.25	.513	336.00	65,400.00	Symbol: WMT
Total value of stocks					**$ 4,430.00**	**$ 287,643.00**	

Direct Investments/ Insurance

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Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
09/21/90	INTEREST ON CREDIT BALANCE AT 7.451% 8/21 THRU 9/20	$ .27			$ .27
Total interest earned		**$ .27**	**$ 0.00**		**$ .27**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
09/10/90	CHEVRON CORP CASH DIV ON 300 SHS RECORD 08/06/90 PAY 09/10/90	$ 232.50			$ 232.50
09/10/90	ELI LILLY & CO CASH DIV ON 600 SHS RECORD 08/15/90 PAY 09/08/90	246.00			246.00
Total dividends earned		**$ 478.50**	**$ 0.00**		**$ 478.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
09/14/90	SLH GOVERNMENT AND AGENCIES FUND	$ 1,612.64		Reinvested	$ 1,612.64
Total earnings from money funds		**$ 1,612.64**	**$ 0.00**		**$ 1,612.64**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 240,696.54**
09/11/90	AutoInvest	SLH GOVERNMENT AND AGENCIES FUND	517.95	517.95
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1,612.64	1,612.64
	Closing money funds balance			**$ 242,827.13**

Tax Id number 55-6085192

Your Financial Consultant

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717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08087-15 240

As you requested, copies of this statement have also been sent to:

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JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ .19
Money funds		244,676.78
Stocks		280,073.25
Direct Investments/insurance		*(see Portfolio details)*
Net value this period		**$ 524,750.22**
Net value last period	**$ 530,670.40**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

		This year	
	This period	Taxable	Non-taxable
Interest	$ .19	$ 61.82	$ 0.00
Dividends	499.50	8,099.75	0.00
Money funds earnings	1,349.88	5,348.64	0.00
Total	**$ 1,849.57**	**$ 13,510.21**	**$ 0.00**

3427

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 242,827.40**
	Amounts added	Amounts subtracted	
Interest credited	.19		
Dividends credited	499.50		
Money funds earnings reinvested	1,349.88		
Total	$ 1,849.57	$ 0.00	
Combined closing cash and money funds balance			**$ 244,676.97**

Cash	.19
Money funds	244,676.78

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/26/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	244,676.78	$ 244,676.78	7.214%	Accrued dividends of $ 672.13
Total value of money funds		**$ 244,676.78**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	400	$ 61.75	3.433%	$ 848.00	$ 24,700.00	Symbol: BMY\Rated: A+
BROWNING FERRIS INDUSTRIES INC	NYSE	600	28.00	2.285	384.00	16,800.00	Symbol: BFI\Rated: A+
BURLINGTON RES INC	NYSE	500	43.625	1.604	350.00	21,812.50	Symbol: BR
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	42.50	1.882	40.00	2,125.00	Symbol: GAP\Rated: B+
ELI LILLY & CO	NYSE	600	73.00	2.246	984.00	43,800.00	Symbol: LLY\Rated: A+
LIN BROADCASTING CORP	OTC	26	45.00			1,170.00	Symbol: LINB\Rated: B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	12.75			165.75	Symbol: MCAWA
MERCK & CO INC	NYSE	300	79.125	2.83	672.00	23,737.50	Symbol: MRK\Rated: A+

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
TOYS R US	NYSE	1,050	$ 22.25			$ 23,362.50	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	45.375	.793	288.00	36,300.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	28.875	2.424	560.00	23,100.00	Symbol: UCL\Rated: B
WAL-MART STORES INC	NYSE	2,400	26.25	.533	336.00	63,000.00	Symbol: WMT\Rated: A+
Total value of stocks					**$ 4,462.00**	**$ 280,073.25**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
10/22/90	INTEREST ON CREDIT BALANCE AT 7.234% 9/21 THRU 10/21	$ .19			$ .19
Total interest earned		**$ .19**	**$ 0.00**		**$ .19**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
10/01/90	BURLINGTON RES INC CASH DIV ON 500 SHS RECORD 09/14/90 PAY 10/01/90	$ 87.50			$ 87.50
10/01/90	MERCK & CO INC CASH DIV ON 300 SHS RECORD 09/04/90 PAY 10/01/90	168.00			168.00

Account number 685-08087-15 240

Dividends *continued*

Date	Description	Taxable	Non-taxable	Comment	Amount
10/01/90	TYCO LABORATORIES INC CASH DIV ON 800 SHS RECORD 09/04/90 PAY 10/01/90	$ 64.00			$ 64.00
10/04/90	WAL-MART STORES INC CASH DIV ON 2400 SHS RECORD 08/31/90 PAY 10/04/90	84.00			84.00
10/05/90	BROWNING FERRIS INDUSTRIES INC CASH DIV ON 600 SHS RECORD 09/21/90 PAY 10/05/90	96.00			96.00
Total dividends earned		**$ 499.50**	**$ 0.00**		**$ 499.50**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
10/12/90	AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND	$ 1,349.88		Reinvested	$ 1,349.88
Total earnings from money funds		**$ 1,349.88**	**$ 0.00**		**$ 1,349.88**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 242,827.13**
10/02/90	Autoinvest	SLH GOVERNMENT AND AGENCIES FUND	319.77	319.77
10/08/90	Autoinvest	AMERICAN EXPRESS GOVERNMENT AND AGENCIES FUND	180.00	180.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1,349.88	1,349.88
	Closing money funds balance			**$ 244,576.78**

October 29 - November

Tax id number 55-6085192
Your Financial Consultant

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EDWARD GEORGE RAHALL TRUSTEE
U/A/D 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Money funds		$ 211,294.06
Stocks		319,978.50
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 531,272.56**
Net value last period	$ 524,750.22	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .13	$ 61.95	$ 0.00
Dividends	362.00	8,461.75	0.00
Money funds earnings	1,339.69	6,688.33	0.00
Total	**$ 1,701.82**	**$ 15,212.03**	**$ 0.00**

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 244,676 97**
Securities bought and other subtractions		-48,819.36	
Securities sold and other additions	13,734 63		
Interest credited	.13		
Dividends credited	362 00		
Money funds earnings reinvested	1,339 69		
Total	$ 15,436.45	$ -48,819 36	
Combined closing cash and money funds balance			**$ 211,294.06**

Money funds 211,294 06

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 11/30/90

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	211,294 06	$ 211,294 06	7 061%	Accrued dividends of $ 928 97
Total value of money funds		**$ 211,294.06**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	400	$ 65 75	3 224%	$ 848 00	$ 26,300 00	Symbol: BMY\Rated: A+
BURLINGTON RES INC	NYSE	500	42 625	1 642	350 00	21,312.50	Symbol: BR
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	39 50	2.025	40 00	1,975.00	Symbol: GAP\Rated: B+
ELI LILLY & CO	NYSE	600	73 75	2 223	984.00	44,250.00	Symbol: LLY\Rated A+
LIN BROADCASTING CORP	OTC	26	57 75			1,501.50	Symbol: LINB\Rated: B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	16 50			214.50	Symbol. MCAWA
MERCK & CO INC	NYSE	300	86 25	2 597	672 00	25,875.00	Symbol: MRK\Rated: A+

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PHILIP MORRIS COS INC	NYSE	500	$ 48 625	3 537%	$ 860 00	$ 24,312.50	Symbol MO\Rated A +
TOYS R US	NYSE	1,050	23 25			24,412 50	Symbol TOY\Rated B +
TYCO LABORATORIES INC	NYSE	800	39 625	908	288.00	31,700 00	Symbol TYC\Rated A-
UNOCAL CORP	NYSE	800	28 625	2 445	560 00	22,900 00	Symbol UCL\Rated B
WAL-MART STORES INC	NYSE	2,400	30 125	.464	336 00	72,300 00	Symbol WMT\Rated A +
WASTE MANAGEMENT INC	NYSE	700	32.75	1.099	252 00	22,925 00	Symbol WMX\Rated A
Total value of stocks					**$ 5,190.00**	**$ 319,978.50**	

Direct Investments/ Insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000 00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
11/21/90	Sold	BROWNING FERRIS INDUSTRIES INC	-600	$ 23 25	$ 13,734 63
11/21/90	Bought	PHILIP MORRIS COS INC	500	49 00	-24,798 83
11/21/90	Bought	WASTE MANAGEMENT INC	700	33.875	-24,020 53
Total securities bought and other subtractions					**$ -48 819 36**
Total securities sold and other additions					**$ 13,734 63**

Account number 685-08087-15 240

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
11/21/90	INTEREST ON CREDIT BALANCE AT 7.107% 10/22 THRU 11/20	$ .13			$ .13
Total interest earned		**$ .13**	**$ 0.00**		**$ .13**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
11/01/90	BRISTOL MYERS SQUIBB CO CASH DIV ON 400 SHS RECORD 10/05/90 PAY 11/01/90	$ 212.00			$ 212.00
11/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 50 SHS RECORD 10/16/90 PAY 11/01/90	10.00			10.00
11/09/90	UNOCAL CORP CASH DIV ON 800 SHS RECORD 10/10/90 PAY 11/09/90	140.00			140.00
Total dividends earned		**$ 362.00**	**$ 0.00**		**$ 362.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
11/09/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 1,339.69		Reinvested	$ 1,339.69
Total earnings from money funds		**$ 1,339.69**	**$ 0.00**		**$ 1,339.69**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 244,676.78**
11/02/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	222.19	222.19
11/12/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	140.00	140.00

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
11/21/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	35,084 60	$ -35,084 60
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1,339 69	1,339 69
	Closing money funds balance			**$ 211,294.06**

December 1 - December 31, 1990

Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to:

GERALD T. ROLFE
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ .05
Money funds		193,149.80
Stocks		343,129.50
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 536,279.35**
Net value last period	**$ 531,272.56**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .05	$ 62.00	$ 0.00
Dividends	246.00	8,707.75	0.00
Money funds earnings	1,996.21	8,684.54	0.00
Total	**$ 2,242.26**	**$ 17,454.29**	**$ 0.00**

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 211,294 06
Securities bought and other subtractions		-20,386.47	
Securities sold and other additions	0.00		
Interest credited	.05		
Dividends credited	246 00		
Money funds earnings reinvested	1,996.21		
Total	$ 2,242.26	$ -20,386.47	
Combined closing cash and money funds balance			$ 193,149.85

Cash	.05
Money funds	193,149.80

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND (FORMERLY SLH GOVERNMENT AND AGENCIES FUND)	193,149.80	$ 193,149 80	6 836%	
Total value of money funds		**$ 193,149.80**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BRISTOL MYERS SQUIBB CO	NYSE	400	$ 67.00	3.582%	$ 960.00	$ 26,800.00	Symbol: BMY\Rated: A+
BURLINGTON RES INC	NYSE	500	38.00	1 842	350.00	19,000.00	Symbol: BR
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	44.125	1 813	40 00	2,206 25	Symbol: GAP\Rated: B+
ELI LILLY & CO	NYSE	600	73 25	2.73	1,200.00	43,950 00	Symbol. LLY\Rated A+
LIN BROADCASTING CORP	OTC	26	61.50			1,599 00	Symbol: LINB\Rated. B+
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	13	17.25			224.25	Symbol: MCAWA

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Stocks *continued*

Common stocks — ***Account number 685-08087-15 240***

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
MCDONALDS CORP	NYSE	700	$ 29.125	1.167%	$ 238.00	$ 20,387.50	Symbol: MCD\Rated: A+
MERCK & CO INC	NYSE	300	89.875	2.492	672.00	26,962.50	Symbol: MRK\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	51.75	3.323	860.00	25,875.00	Symbol: MO\Rated: A+
TOYS R US	NYSE	1,050	22.50			23,625.00	Symbol: TOY\Rated: B+
TYCO LABORATORIES INC	NYSE	800	43.00	.837	288.00	34,400.00	Symbol: TYC\Rated: A-
UNOCAL CORP	NYSE	800	26.25	2.666	560.00	21,000.00	Symbol: UCL\Rated: B
WAL-MART STORES INC NEW	NYSE	2,400	30.25	.462	336.00	72,600.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	35.00	1.028	252.00	24,500.00	Symbol: WMX\Rated: A
Total value of stocks					**$ 5,756.00**	**$ 343,129.50**	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments/insurance	**$ 20,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/04/90	Bought	MCDONALDS CORP AVG PRICE SHOWN-DETAILS ON REQ	700	$ 28.714	$ -20,386.47
Total securities bought and other subtractions					**$ -20,386.47**
Total securities sold and other additions					**$ 0.00**

Account number 685-08087-15 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
12/21/90	INTEREST ON CREDIT BALANCE AT 6.970% 11/21 THRU 12/20	$ .05			$ .05
Total interest earned		**$ .05**	**$ 0.00**		**$ .05**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
12/10/90	ELI LILLY & CO CASH DIV ON 600 SHS RECORD 11/15/90 PAY 12/08/90	$ 246.00			$ 246.00
Total dividends earned		**$ 246.00**	**$ 0.00**		**$ 246.00**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
12/14/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	$ 1,448.27		Reinvested	$ 1,448.27
12/31/90	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	547.94		Reinvested	547.94
Total earnings from money funds		**$ 1,996.21**	**$ 0.00**		**$ 1,996.21**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 211,294.06**
12/04/90	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	20,386.47	-20,386.47
12/11/90	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	246.00	246.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1,996.21	1,996.21
	Closing money funds balance			**$ 193,149.80**

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-6950	55-6085192

#3

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$105,250.00	$234.00CR	$15,616.39	$121,100.39

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	234.00CR	234.00CR
NET CLOSING BALANCE		234.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	18,071.39	15,616.39
TOTAL MONEY MARKET		15,616.39

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	486.00CR	486.00CR
CEF DIVIDENDS CREDITED	59.00CR	59.00CR
AVERAGE YIELD 12/30/89 TO 1/15/90 7.82%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	234.00	
1 05	1	JOURNAL		TRF TO 6539-9300		3,000.00	
1 08	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,000.00
1 15	1	DIVIDEND		MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST QUANTITY 2000			252.00
1 16	1	DIVIDEND	59	REINVESTED DIVIDEND CEF AS OF 1/15/90			
1 16	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	252.00	
1 30	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WF301C

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Wheat, First Securities, Inc.

707 EAST MAIN ST. RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.6250	19,250.00
1	2000		MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST	11.0000	22,000.00
1	2000		SOUTHERN B^NKSHARES INC W VA	32.0000	64,000.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		105,250.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

OWN STOCK IN OVER 60 WELL-KNOWN COMPANIES IN THE FAST-GROWING SOUTHEAST THROUGH THE SOUTHEASTERN GROWTH FUND: A UNIQUE INVESTMENT OPPORTUNITY PLUS PROFESSIONAL MANAGEMENT AND DIVERSIFICATION. SEE THE ENCLOSED INSERT, OR CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$103,000.00	$234.00CR	$16,202.39	$119,436.39

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	234.00CR	234.00CR
NET CLOSING BALANCE		234.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	15,616.39	16,202.39
TOTAL MONEY MARKET		16,202.39

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	464.00CR	950.00CR
OTHER INCOME CREDITED	22.00CR	22.00CR
CEF DIVIDENDS CREDITED	100.00CR	159.00CR
AVERAGE YIELD 1/16/90 TO 2/15/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	234.00	
2 13	1	CAPITAL GAIN		MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST QUANTITY 2000			22.00
2 13	1	DIVIDEND		MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST QUANTITY 2000			230.00
2 16	1	DIVIDEND	100	REINVESTED DIVIDEND CEF AS OF 2/15/90			
2 20	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	252.00	
2 27	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT

EDWARD G RAHALL
DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.3750	18,750.00
1	2000		MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST	10.1250	20,250.00
1	2000		SOUTHERN BANKSHARES INC W VA	32.0000	64,000.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		103,000.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

SECURITIES IN YOUR ACCOUNT ARE PROTECTED UP TO $10 MILLION: $500,000(CASH UP TO $100,000) BY THE SECURITIES INVESTOR PROTECTION CORP.(SIPC), PLUS $9.5 MILLION BY ADDITIONAL COMMERCIAL INSURANCE. DECLINE IN MARKET VALUE OF SECURITIES IS NOT COVERED.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$57,250.00		$62,040.55	$119,290.55

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	234.00CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	16,202.39	62,040.55
TOTAL MONEY MARKET		62,040.55

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	486.00CR	1,436.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	92.00CR	251.00CR
AVERAGE YIELD 2/16/90 TO 3/15/90 7.42%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	234.00	
3 13	1	DIVIDEND		MFS CHAPTER INCOME TRUST SHARES OF BENEFICIAL INTEREST QUANTITY 2000			252.00
3 15	1	SALE	2000-	MFS CHARTER INCOME TRUST SHARES OF BENEFICIAL INTEREST	10.0000		19,871.58
3 16	1	DIVIDEND	92	REINVESTED DIVIDEND CEF AS OF 3/15/90			
3 20	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	252.00	
3 22	1	SALE	1000-	SOUTHERN BANKSHARES INC W VA	37.5000		37,009.58
3 23	1	PURCHASE	1500	MFS GOVT INCOME PLUS -	7.7700	11,655.00	

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-8950	58-6085182

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				TRUST SBI AS OF 3/22/90			
3 23	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	19,671.56	
3 29	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00
3 30	1	TO PLAN ACCT	1500-	MFS GOVT INCOME PLUS - TRUST SBI			
3 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	25,588.58	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.1250	18,250.00
1	1000		SOUTHERN BANKSHARES INC W VA	39.0000	39,000.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		57,250.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

SAFEGUARDING THE ENVIRONMENT IS EXPECTED TO BECOME AN IMPORTANT PART OF THE NATIONAL ECONOMY. NOW YOU CAN INVEST IN COMPANIES THAT ARE WELL-POSITIONED TO CAPITALIZE ON THIS BUSINESS THROUGH THE KEMPER ENVIRONMENTAL SERVICES FUND. ASK YOUR FINANCIAL CONSULTANT FOR DETAILS.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$83,125.00		$35,896.29	$119,021.29

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	62,040.55	35,896.29
TOTAL MONEY MARKET		35,896.29

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	718.00CR	2,154.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	279.00CR	530.00CR
AVERAGE YIELD 3/16/90 TO 4/16/90 7.48%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	1	PURCHASE	2000	KEMPER MULTI-MARKET INCOME TRUST	9.2500	18,597.07	
4 06	1	SALE	1200-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		10,869.51
4 06	1	SALE	700-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		6,340.54
4 06	1	SALE	100-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		905.78
4 10	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		18,897.07
4 16	1	DIVIDEND		SOUTHERN BANKSHARES INC W VA QUANTITY 1000			250.00
4 17	1	DIVIDEND	279	REINVESTED DIVIDEND CEF AS OF 4/16/90			
4 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	18,385.83	
4 18	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		7,500.00
4 19	1	CHECK ISSUED		CHECK ISSUED #13218652		7,500.00	
4 20	1	PURCHASE	500	GANNETT CO INC DEL	37.0000	18,794.54	
4 26	1	SALE	5-	CALL GANNETT CO INC DEL	1.0000		434.52

---CONTINUED ON NEXT PAGE---

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL
DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$40 EXP 07/21/90			
4 27	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 4000			468.00
4 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		18,380.02
4 27	1	DIVIDEND		SOUTHERN BANKSHARE 2000		500.00	
4 30	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		32.00

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GANNETT CO INC DEL	36.8750	18,437.50
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.1250	18,250.00
1	1000		SOUTHERN BANKSHARES INC W VA	47.0000	47,000.00
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 07/21/90	1.1250	562.50-
			VALUE OF PRICED SECURITIES		83,125.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT STOCK RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. SEE THE ENCLOSURE, THEN ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-8950	55-6085192

NICK RAHALL
243 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$88,625.00	$234.00CR	$36,151.29	$125,010.29

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	234.00CR
NET CLOSING BALANCE		234.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	35,896.29	36,151.29
TOTAL MONEY MARKET		36,151.29

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	234.00CR	2,388.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	255.00CR	785.00CR
AVERAGE YIELD 4/17/90 TO 5/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 16	1	DIVIDEND	255	REINVESTED DIVIDEND CEF AS OF 5/15/90			
5 30	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GANNETT CO INC DEL	41.1250	20,562.50
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.6250	19,250.00
1	1000		SOUTHERN BANKSHARES INC W VA	50.0000	50,000.00

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FORM 10 WFS

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 07/21/90	2.3750	1,187.50-
			VALUE OF PRICED SECURITIES		88,625.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WAITING FOR THE "PERFECT TIME" TO INVEST? ASK YOUR FINANCIAL CONSULTANT TO SEND YOU THE FULL STORY OF "LOUIE THE LOSER," A FICTIONAL CHARACTER WHO HAS HAD SURPRISING SUCCESS INVESTING IN A NUMBER OF AMERICAN FUNDS AT THE TOP OF THE MARKET EACH YEAR!

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$83,125.00		$35,896.29	$119,021.29

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	62,040.55	35,896.29
TOTAL MONEY MARKET		35,896.29

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	718.00CR	2,154.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	279.00CR	530.00CR
AVERAGE YIELD 3/16/90 TO 4/16/90 7.48%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	1	PURCHASE	2000	KEMPER MULTI-MARKET INCOME TRUST	9.2500	18,897.07	
4 06	1	SALE	1200-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		10,869.51
4 06	1	SALE	700-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		6,340.54
4 06	1	SALE	100-	KEMPER MULTI-MARKET INCOME TRUST	9.2500		905.78
4 10	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		18,897.07
4 16	1	DIVIDEND		SOUTHERN BANKSHARES INC W VA QUANTITY 1000			250.00
4 17	1	DIVIDEND	279	REINVESTED DIVIDEND CEF AS OF 4/16/90			
4 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	18,365.83	
4 18	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		7,500.00
4 19	1	CHECK ISSUED		CHECK ISSUED #13218652		7,500.00	
4 20	1	PURCHASE	500	GANNETT CO INC DEL	37.0000	18,794.54	
4 26	1	SALE	5-	CALL GANNETT CO INC DEL	1.0000		434.52

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$40 EXP 07/21/90			
4 27	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 4000			466.00
4 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		18,360.02
4 27	1	DIVIDEND		SOUTHERN BANKSHARE 2000		500.00	
4 30	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		32.00

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GANNETT CO INC DEL	36.8750	18,437.50
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.1250	18,250.00
1	1000		SOUTHERN BANKSHARES INC W VA	47.0000	47,000.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 07/21/90	1.1250	562.50-
			VALUE OF PRICED SECURITIES		83,125.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT STOCK RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. SEE THE ENCLOSURE, THEN ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-8950	55-6065192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$87,750.00	$234.00CR	$36,817.29	$124,801.29

ACCOUNT BALANCE($)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	234.00CR	234.00CR
NET CLOSING BALANCE		234.00CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	36,151.29	36,817.29
TOTAL MONEY MARKET		36,817.29

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	234.00CR	2,622.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	232.00CR	1,017.00CR
AVERAGE YIELD 5/16/90 TO 6/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 05	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	234.00	
6 15	1	DIVIDEND	232	REINVESTED DIVIDEND CEF AS OF 6/15/90			
6 28	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GANNETT CO INC DEL	38.2500	19,125.00
1	2000		KEMPER MULTI-MARKET INCOME TRUST	9.6750	19,750.00

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15,377 FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8539-8950	55-8085182

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
218 1/2 MAIN ST

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	1000		SOUTHERN BANKSHARES INC W VA	49.0000	49,000.00
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER $	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 07/21/90	.2500	125.00-
			VALUE OF PRICED SECURITIES		87,750.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WITH THE STOCK MARKET'S CLIMB DURING THE PAST SEVERAL MONTHS, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? NOW'S A GOOD TIME TO REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT. CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6539-8850	55-8085192	

EDWARD G RAHALL
DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
218 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$93,312.50	$20,327.DB	$57,959.28	$130,944.17

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	234.00CR	20,327.61DB
NET CLOSING BALANCE		20,327.61DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	36,617.28	57,959.28
TOTAL MONEY MARKET		57,959.28

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	834.00CR	3,258.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	234.00CR	1,251.00CR
AVERAGE YIELD 6/16/90 TO 7/16/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7.02	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 500			150.00
7 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	384.00	
7 17	1	DIVIDEND	234	REINVESTED DIVIDEND CEF AS OF 7/16/90			
7 20	1	DIVIDEND		SOUTHERN BANKSHARES INC W VA QUANTITY 1000			250.00
7 20	1	SALE	5-	CALL GANNETT CO INC DEL $40 EXP 10/20/90	.8750		391.13
7 23	1	SALE	2000-	KEMPER MULTI-MARKET INCOME TRUST	10.1250		19,848.86
7 23	1	EXPIRED	5	CALL GANNETT CO INC DEL $40 EXP 07/21/90 AS OF 7/21/90			

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
8K08 6539-8950	55-6085192	

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

DUPLICATE FOR THE ACCOUNT OF
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 24	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	641.13	
7 26	1	PURCHASE	2000	COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	6.6250	13,551.74	
7 26	1	PURCHASE	1000	COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	6.6250	6,775.87	
7 30	1	DIVIDEND		KEMPER MULTI-MARKET INCOME TRUST QUANTITY 2000			234.00
7 31	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	20,082.86	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	3000		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	6.7500	20,250.00
1	500		GANNETT CO INC DEL	36.2500	18,125.00
1	1000		SOUTHERN BANKSHARES INC W VA	55.2500	55,250.00
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
.1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 10/20/90	.6250	312.50-
			VALUE OF PRICED SECURITIES		93,312.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND WILL BEGIN IN AUGUST TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$83,593.75		$37,867.60	$121,461.35

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	20,327.61DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	57,959.28	37,867.60
TOTAL MONEY MARKET		37,867.60

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	3,256.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	235.93CR	1,486.93CR
AVERAGE YIELD ON MONEY MARKET	7/17/90 TO 8/15/90	7.38%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 02	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		20,327.61
8 16	1	DIVIDEND	235.93	REINVESTED DIVIDEND CEF AS OF 8/15/90			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	3000		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	5.5000	16,500.00
1	500		GANNETT CO INC DEL	34.2500	17,125.00
1	1000		SOUTHERN BANKSHARES INC W VA	50.0000	50,000.00

---CONTINUED ON NEXT PAGE---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-8950	55-6085192

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
1		5	CALL GANNETT CO INC DEL $40 EXP 10/20/90	.0625	31.25-
			VALUE OF PRICED SECURITIES		83,593.75

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND HAS BEGUN TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH AND/OR INCOME	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$61,500.00		$54,929.48	$116,429.48

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	38,387.67	54,929.48
TOTAL MONEY MARKET		54,929.48

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	670.00CR	4,198.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	213.52CR	1,950.52CR
AVERAGE YIELD ON MONEY MARKET	9/18/90 TO 10/15/90	7.25%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 500			150.00
10 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	150.00	
10 12	1	DIVIDEND		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST QUANTITY 3000			270.00
10 16	1	DIVIDEND	213.52	REINVESTED DIVIDEND CEF AS OF 10/15/90			
10 16	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	270.00	
10 22	1	DIVIDEND		SOUTHERN BANKSHARES INC W VA QUANTITY 1000			250.00
10 22	1	SALE	500-	GANNETT CO INC DEL	31.7500		15,638.29
10 22	1	EXPIRED	5	CALL GANNETT CO INC DEL $40 EXP 10/20/90 AS OF 10/20/90			
10 23	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	250.00	
10 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	15,858.29	

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 8539-8950	55-6085192	GROWTH AND/OR INCOME	EDWARD Q RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	3000		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	4.5000	13,500.00
1	1000		SOUTHERN BANKSHARES INC W VA	48.0000	48,000.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		61,500.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

TO AVOID POSSIBLE FUTURE IRA INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH AND/OR INCOME	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$59,625.00		$55,494.76	$115,119.76

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	54,929.48	.00
GSP GOVT SEC PORTFOLIO	.00	55,494.76
TOTAL MONEY MARKET		55,494.76

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	270.00CR	4,468.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	295.28CR	2,245.80CR
AVERAGE YIELD ON MONEY MARKET 10/16/90 TO 11/15/90		7.26%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 09	1	DIVIDEND		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST QUANTITY 3000			270.00
11.13	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	270.00	
11 16	1	DIVIDEND	295.28	REINVESTED DIVIDEND CEF AS OF 11/15/90			
11 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	55,494.76	
11 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		55,494.76

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	3000		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	3.8750	11,625.00
1	1000		SOUTHERN BANKSHARES INC W VA	48.0000	48,000.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH AND/OR INCOME	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	

VALUE OF PRICED SECURITIES 59,625.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

TO AVOID POSSIBLE FUTURE IRS INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

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FORM 10 WFS01

Wheat, First Securities, Inc.

707 EAST MAIN ST . RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH AND/OR INCOME	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$61,000.00	$132.30CR	$56,837.67	$117,969.97

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	132.30CR
NET CLOSING BALANCE		132.30CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	55,494.76	56,837.67
TOTAL MONEY MARKET		56,837.67

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	975.00CR	5,441.00CR
OTHER INCOME CREDITED	.00	22.00CR
CEF DIVIDENDS CREDITED	132.30CR	2,378.10CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.17%
GSP DIVIDENDS CREDITED	367.91CR	367.91CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.03%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 14	1	DIVIDEND		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST QUANTITY 3000			225.00
12 14	1	DIVIDEND		SOUTHERN BANKSHARES INC W VA QUANTITY 1000			750.00
12 18	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	975.00	
12 31	1	DIVIDEND		CEF-MONEY MKT PORTFOLIO			132.30
12 31	1	DIVIDEND	367.91	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE

EQUITIES AND OPTIONS

---CONTINUED ON NEXT PAGE---

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 8539-8950	55-6085182	GROWTH AND/OR INCOME	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	3000		COLONIAL INTERMEDIATE HIGH INCOME FUND SHARES OF BENEFICIAL INTEREST	4.0000	12,000.00
1	1000		SOUTHERN BANKSHARES INC W VA	49.0000	49,000.00
1	187.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		61,000.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

MF	4031.421		MFS GOVT INCOME PLUS TR (AS OF 12/21)	7.0300	28,340.88

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IT HAS BEEN A PLEASURE SERVING YOU IN 1990, AND WE WANT YOU TO KNOW THAT WE APPRECIATE YOUR BUSINESS. WE LOOK FORWARD TO SERVING YOU IN THE NEW YEAR, AND WE WILL DO EVERYTHING POSSIBLE TO MERIT THE CONFIDENCE YOU HAVE SHOWN IN US.

---END OF STATEMENT---

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

#4

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 16	1	DIVIDEND	400	REINVESTED DIVIDEND CEF AS OF 1/15/90			
1 22	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,598.59
1 29	2	PURCHASE	100	TIME WARNER INC	102.2500	10,318.82	
1 30	2	SHORT SALE	1-	CALL TIME WARNER $105 EXP 03/17/90	2.8750		252.49
	1	NET JOURNALS		TRF FRM CASH ACCT		27,081.53	
	2	NET JOURNALS		TRF TO MARGIN ACCT			27,081.53

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	53.5000	10,700.00
2	500		ALLIED SIGNAL INC	34.0000	17,000.00
2	400		BROWNING-FERRIS INDUSTRIES INC	35.6250	14,250.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	400		GANNETT CO INC DEL	41.0000	16,400.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	61.7500	12,350.00
2	300		INTERPUBLIC GRP CO INC	30.5000	9,150.00
2	300		MC DONALDS CORP COMMON	32.6250	9,787.50
2	400		SAFETY KLEEN CORP	28.7500	11,500.00
2	200		TIME WARNER INC	101.0000	20,200.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $75 EXP 02/17/90	.0625	12.50-
2		5	CALL ALLIED SIGNAL INC $40 EXP 03/17/90	.1875	93.75-
2		2	CALL HILTON HOTELS $90 EXP 02/17/90	.1875	37.50-
2		1	CALL TIME WARNER $105 EXP 03/17/90	4.2500	425.00-

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6639-9850	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
2		1	CALL TIME WARNER $150 EXP 03/17/90	.1875	18.75-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/08 DTD 6/01/83 CALL 4/01/93 @ 30.488	30.5070	15,253.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 81.677	47.0730	14,121.90
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/86 FC 12/01/10 CALL 6/01/00 @ 103.000	21.1830	7,414.05
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	34.0820	10,224.60
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.3470	267.35
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9380	3,122.10
			VALUE OF PRICED SECURITIES		171,928.50

---CONTINUED ON NEXT PAGE---

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9850	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/90 THRU 1/31/90	4

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

OWN STOCK IN OVER 80 WELL-KNOWN COMPANIES IN THE FAST-GROWING SOUTHEAST THROUGH THE SOUTHEASTERN GROWTH FUND: A UNIQUE INVESTMENT OPPORTUNITY PLUS PROFESSIONAL MANAGEMENT AND DIVERSIFICATION. SEE THE ENCLOSED INSERT, OR CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FORM O WF501

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9850	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$172,656.95	$289.98CR	$89,175.07	$262,122.00

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	289.98CR
MARGIN ACCT - TYPE 2	10,064.33DB	.00
NET CLOSING BALANCE		289.98CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	97,973.39	89,175.07
TOTAL MONEY MARKET		89,175.07

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	186.00CR
CEF DIVIDENDS CREDITED	607.00CR	1,007.00CR
AVERAGE YIELD 1/16/90 TO 2/15/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 02	2	SHORT SALE	2-	CALL HILTON HOTELS $80 EXP 04/21/90	1.5625		274.21
2 05	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,790.12
2 09	2	SHORT SALE	2-	CALL A M R CORP $65 EXP 08/18/90	2.1250		384.80
2 13	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	384.80	
2 18	1	DIVIDEND	607	REINVESTED DIVIDEND CEF AS OF 2/15/90			
2 20	2	EXPIRED	2	CALL A M R CORP $75 EXP 02/17/90 AS OF 2/17/90			
2 20	2	EXPIRED	2	CALL HILTON HOTELS $90 EXP 02/17/90 AS OF 2/17/90			

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST. RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9850	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 23	1	SALE	1-	CALL TIME WARNER $100 EXP 06/16/90	3.2500		289.98
	1	NET JOURNALS		TRF FRM CASH ACCT		9,405.32	
	2	NET JOURNALS		TRF TO MARGIN ACCT			9,405.32

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	60.3750	12,075.00
2	500		ALLIED SIGNAL INC	35.1250	17,562.50
2	400		BROWNING-FERRIS INDUSTRIES INC	35.8750	14,350.00
1	25000		CHAMPION SPORTS INC	.0320	800.00
1	595		~~EGK IND~~ INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	400		GANNETT CO INC DEL	40.3750	16,150.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	62.6250	12,525.00
2	300		INTERPUBLIC GRP CO INC	30.5000	9,150.00
2	300		MC DONALDS CORP COMMON	31.5000	9,450.00
2	400		SAFETY KLEEN CORP	29.1250	11,650.00
2	200		TIME WARNER INC	98.5000	19,300.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	3.5000	700.00-
2		5	CALL ALLIED SIGNAL INC $40 EXP 03/17/90	.0625	31.25-
2		2	CALL HILTON HOTELS $80 EXP 04/21/90	.3750	75.00-
2		1	CALL TIME WARNER $105 EXP 03/17/90	.4375	43.75-
2		1	CALL TIME WARNER $150 EXP 03/17/90	.1250	12.50-
1		1	CALL TIME WARNER $100 EXP 06/16/90	5.5000	550.00-
			FIXED INCOME SECURITIES		

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/90 THRU 2/28/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	31.0580	15,529 00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	47.3710	14,211.30
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	21.5560	7,544.60
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	34.5170	10,355.10
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.3930	269.65
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	6.9940	3,147.30
			VALUE OF PRICED SECURITIES		172,658.95

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

END

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$135,145.25	$10,688.26CR	$172,111.71	$317,945.22

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	289.98CR	.00
MARGIN ACCT - TYPE 2	.00	10,688.26CR
NET CLOSING BALANCE		10,688.26CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	89,175.07	172,111.71
TOTAL MONEY MARKET		172,111.71

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	399.25CR	585.25CR
CEF DIVIDENDS CREDITED	510.00CR	1,517.00CR
AVERAGE YIELD 2/16/90 TO 3/15/90 7.42%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 01	1	JOURNAL	200	TIME WARNER INC			
3 01	2	JOURNAL	200-	TIME WARNER INC			
3 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	289.98	
3 08	2	SALE	400-	SAFETY KLEEN CORP	31.7500		12,509.00
3 09	2	DIVIDEND		ALLIED SIGNAL INC			225.00
				QUANTITY 500			
3 09	2	DIVIDEND		TIME WARNER INC			50.00
				QUANTITY 200			
3 13	1	JOURNAL	200-	TIME WARNER INC			
3 13	1	JOURNAL	1	CALL TIME WARNER			
				$100 EXP 06/16/90			
3 13	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	275.00	
3 13	2	JOURNAL	200	TIME WARNER INC			
3 13	2	JOURNAL	1-	CALL TIME WARNER			
				$100 EXP 06/16/90			

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K06 6539-9950	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
218 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 15	1	SALE	1060-	SOUTHERN BANKSHARES INC W VA	34.7500		36,835.00
3 15	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	12,508.00	
3 15	2	DIVIDEND		INTERPUBLIC GRP CO INC QUANTITY 300			51.00
3 16	1	RECEIVED	1060	SOUTHERN BANKSHARES INC W VA			
3 16	1	RECEIVED	1	TOSCO CORP (OLD) CHG			
3 16	1	RECEIVED	25000	THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PWT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082			
3 16	1	DIVIDEND	510	REINVESTED DIVIDEND CEF AS OF 3/15/90			
3 16	2	DIVIDEND		HILTON HOTELS CORP COM QUANTITY 200			50.00
3 16	2	SALE	200-	ALLIED SIGNAL INC	36.0000		7,065.59
3 19	2	DIVIDEND		MC DONALDS CORP COMMON QUANTITY 300			23.25
3 19	2	EXPIRED	5	CALL ALLIED SIGNAL INC $40 EXP 03/17/90 AS OF 3/17/90			
3 19	2	EXPIRED	1	CALL TIME WARNER $105 EXP 03/17/90 AS OF 3/17/90			
3 19	2	EXPIRED	1	CALL TIME WARNER $150 EXP 03/17/90 AS OF 3/17/90			
3 20	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	124.25	
3 23	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	43,900.59	
3 26	2	SALE	300-	ALLIED SIGNAL INC	36.2500		10,888.26
3 26	2	SHORT SALE	3-	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90	1.2500		327.82
3 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	327.82	
3 29	1	DEPOSIT		FUNDS RECD			25,000.00
3 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	25,000.00	
	1	NET JOURNALS		TRF TO CASH ACCT			20,301.86
	2	NET JOURNALS		TRF FRM MARGIN ACCT		20,301.86	

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	64.5000	12,900.00
2	400		BROWNING-FERRIS INDUSTRIES INC	36.5000	14,600.00
1	25000		CHAMPION SPORTS INC	.0312	780.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	400		GANNETT CO INC DEL	39.6250	15,850.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	54.3750	10,875.00
2	300		INTERPUBLIC GRP CO INC	32.7500	9,825.00
2	300		MC DONALDS CORP COMMON	31.7500	9,525.00
2	200		TIME WARNER INC	94.8750	18,975.00
1	1		TOSCO CORP (OLD) CHG	N/A	
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	5.2500	1,050.00-
2		2	CALL HILTON HOTELS $80 EXP 04/21/90	.1250	25.00-
2		3	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90	1.1250	337.50-
2		1	CALL TIME WARNER $100 EXP 08/16/90	2.6250	262.50-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT DY=9.75% CPN 0.000% DUE 4/01/08 DTD 6/01/83 CALL 4/01/93 @ 30.458	21.7960	10,898.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A DY-8.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	47.1400	14,142.00
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT DY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	13.9710	4,889.85

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD Q RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/90 THRU 3/31/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%QRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/88 FC 10/15/88	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	33.7020	10,110.60
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	N/A	
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.4470	272.35
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.0610	3,177.45
			VALUE OF PRICED SECURITIES		135,145 25

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

SAFEGUARDING THE ENVIRONMENT IS EXPECTED TO BECOME AN IMPORTANT PART OF THE NATIONAL ECONOMY. NOW YOU CAN INVEST IN COMPANIES THAT ARE WELL-POSITIONED TO CAPITALIZE ON THIS BUSINESS THROUGH THE KEMPER ENVIRONMENTAL SERVICES FUND. ASK YOUR FINANCIAL CONSULTANT FOR DETAILS.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

37 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$143,800.40		$209,357.48	$353,157.88

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	10,888.26CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	172,111.71	209,357.48
TOTAL MONEY MARKET		209,357.48

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	184.00CR	769.25CR
CORP INTEREST CREDITED	538.65CR	538.65CR
CEF DIVIDENDS CREDITED	1,023.00CR	2,540.00CR
AVERAGE YIELD 3/16/90 TO 4/16/90 7.48%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	10,888.26	
4 02	2	DIVIDEND		GANNETT CO INC DEL QUANTITY 400			120.00
4 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	120.00	
4 03	2	PURCHASE	200	HILTON HOTELS CORP COM	53.7500	10,954.05	
4 03	2	PURCHASE	100	TIME WARNER INC	94.0000	9,502.02	
4 04	2	SALE	200-	HILTON HOTELS CORP COM	53.1250		10,420.59
4 04	2	SALE	100-	TIME WARNER INC	94.7500		9,372.66
4 06	2	DIVIDEND		BROWNING-FERRIS INDUSTRIES INC QUANTITY 400			64.00
4 10	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		20,392.07
4 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	19,793.25	
4 16	1	INTEREST		SHONEYS INNS GRP IV INC			538.65

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heat, First Securities, Inc.

AST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8539-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86 QUANTITY 15000			
4 17	1	DIVIDEND	1023	REINVESTED DIVIDEND CEF AS OF 4/16/90			
4 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	536.85	
4 20	2	PURCHASE	100	GANNETT CO INC DEL	37.0000	3,789.38	
4 20	2	SHORT SALE	2-	CALL HILTON HOTELS $85 EXP 07/21/90	1.5000		259.99
4 23	1	REDEMPTION	1-	TOSCO CORP (OLD) CHG			
4 23	1	CASH IN LIEU		TOSCO CORP XCHED FOR C.I.L. FROM			4.07
4 23	2	EXPIRED	2	CALL HILTON HOTELS $80 EXP 04/21/90 AS OF 4/21/90			
4 24	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	264.06	
4 24	1	DEPOSIT		FUNDS RECD			29,000.00
4 25	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	29,000.00	
4 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,789.38
	1	NET JOURNALS		TRF TO CASH ACCT			6,880.05
	2	NET JOURNALS		TRF FRM MARGIN ACCT		6,880.05	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	62.3750	12,475.00
2	400		BROWNING-FERRIS INDUSTRIES INC	35.3750	14,150.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EQR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	36.8750	18,437.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	46.3750	9,275.00
2	300		INTERPUBLIC GRP CO INC	31.0000	9,300.00
2	300		MC DONALDS CORP COMMON	30.2500	9,075.00

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
2	200		TIME WARNER INC	88.2500	17,650.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	3.0000	600.00-
2		2	CALL HILTON HOTELS $55 EXP 07/21/90	.8750	175.00-
2		3	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90	.1250	37.50-
2		1	CALL TIME WARNER $100 EXP 08/18/90	.9370	93.70-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/08 DTD 6/01/83 CALL 4/01/93 @ 30.458	21.9690	10,984.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	45.9890	13,790.70
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/28/85 FC 12/01/10 CALL 6/01/00 @ 103.000	14.0850	4,929.75
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	32.8080	9,842.40

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6538-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/90 THRU 4/30/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	42.1640	10,541.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.4990	274.95
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1240	3,205.80

VALUE OF PRICED SECURITIES 143,800.40

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT STOCK RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. SEE THE ENCLOSURE, THEN ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FORM © WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	236-78-8845

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$139,476.80	$209.99CR	$226,730.23	$366,416.82

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	.00	209.99CR
NET CLOSING BALANCE		209.99CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	209,357.48	226,730.23
TOTAL MONEY MARKET		226,730.23

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	769.25CR
CORP INTEREST CREDITED	.00	538.65CR
CEF DIVIDENDS CREDITED	1,210.00CR	3,750.00CR
AVERAGE YIELD 4/17/90 TO 5/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 11	2	SHORT SALE	4-	CALL BROWNING-FERRIS IND $40 EXP 05/19/90	.5000		159.99
5 15	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	159.99	
5 16	1	DIVIDEND	1210	REINVESTED DIVIDEND CEF AS OF 5/15/90			
5 21	2	SALE	400-	BROWNING-FERRIS INDUSTRIES INC AS OF 5/18/90	40.0000		15,742.77
5 21	2	EXPIRED	4	CALL BROWNING-FERRIS IND $40 EXP 05/19/90 AS OF 5/19/90			
5 25	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	15,742.77	
5 25	2	SHORT SALE	1-	CALL TIME WARNER $105 EXP 07/21/90 AS OF 5/23/90	3.0000		259.99

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 8539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 29	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	259.99	
5 29	2	SHORT SALE	5-	CALL GANNETT CO INC DEL $45 EXP 07/21/90 AS OF 5/25/90	.5000		209.99
	1	NET JOURNALS		TRF TO CASH ACCT			16,162.75
	2	NET JOURNALS		TRF FRM MARGIN ACCT		16,162.75	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	63.8750	12,775.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	41.1250	20,562.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	55.1250	11,025.00
2	300		INTERPUBLIC GRP CO INC	33.1250	9,937.50
2	300		MC DONALDS CORP COMMON	34.6250	10,387.50
2	200		TIME WARNER INC	105.8750	21,175.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	2.6875	537.50-
2		5	CALL GANNETT CO INC DEL $45 EXP 07/21/90	.6250	312.50-
2		2	CALL HILTON HOTELS $55 EXP 07/21/90	3.1250	625.00-
2		3	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90	.2500	75.00-
2		1	CALL TIME WARNER $100 EXP 08/18/90	7.3750	737.50-
2		1	CALL TIME WARNER $105 EXP 07/21/90	N/A	
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT DY=9.75% CPN 0.000% DUE 4/01/08 DTD 6/01/83 CALL 4/01/93 @ 30.458	22.1500	11,075.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFI

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.877	48.2420	14,472.60
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 103.000	14.2040	4,971.40
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	34.8200	10,446.00
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.062	42.5940	10,648.50
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.5520	277.60
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.1900	3,235.50

VALUE OF PRICED SECURITIES 139,476.60

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

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FORM 10 WFS

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	236-78-8845

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/90 THRU 5/31/90	4

WAITING FOR THE "PERFECT TIME" TO INVEST? ASK YOUR FINANCIAL CONSULTANT TO SEND YOU THE FULL STORY OF "LOUIE THE LOSER," A FICTIONAL CHARACTER WHO HAS HAD SURPRISING SUCCESS INVESTING IN A NUMBER OF AMERICAN FUNDS AT THE TOP OF THE MARKET EACH YEAR!

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FORM © WF1

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$118,845.17		$102,037.32	$220,882.49

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	209.99CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	226,730.23	102,037.32
TOTAL MONEY MARKET		102,037.32

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	192.50CR	961.75CR
CORP INTEREST CREDITED	.00	536.65CR
CEF DIVIDENDS CREDITED	1,436.00CR	5,186.00CR
AVERAGE YIELD 5/16/90 TO 6/15/90 7.52%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 01	2	SALE	300-	MC DONALDS CORP COMMON	35.7500		10,550.58
6 05	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	209.99	
6 08	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	10,550.58	
6 11	2	DIVIDEND		TIME WARNER INC QUANTITY 200			50.00
6 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	50.00	
6 15	2	DIVIDEND		HILTON HOTELS CORP COM QUANTITY 200			80.00
6 15	2	DIVIDEND		INTERPUBLIC GRP CO INC QUANTITY 300			57.00
6 18	1	DIVIDEND	1436	REINVESTED DIVIDEND CEF AS OF 6/15/90			
6 18	2	DIVIDEND		MC DONALDS CORP COMMON QUANTITY 300			25.50

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FORM 10 WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	238-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 18	2	SALE	100-	TIME WARNER INC AS OF 6/15/90	100.0000		9,918.04
6 18	2	EXPIRED	1	CALL TIME WARNER $100 EXP 06/16/90 AS OF 6/16/90			
6 19	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	142.50	
6 22	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	9,918.04	
6 26	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		147,000.00
6 27	1	CHECK ISSUED		CHECK ISSUED #13218970		147,000.00	
	1	NET JOURNALS		TRF TO CASH ACCT			20,871.09
	2	NET JOURNALS		TRF FRM MARGIN ACCT		20,871.09	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	64.1250	12,825.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	38.2500	19,125.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	54.6250	10,925.00
2	300		INTERPUBLIC GRP CO INC	34.7500	10,425.00
2	100		TIME WARNER INC	100.5000	10,050.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	2.1250	425.00-
2		5	CALL GANNETT CO INC DEL $45 EXP 07/21/90	N/A	
2		2	CALL HILTON HOTELS $55 EXP 07/21/90	1.3750	275.00-
2		3	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90	.5625	168.75-

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	236-78-8845

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
2		1	CALL TIME WARNER $105 EXP 07/21/90	1.5000	150.00-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	22.3150	11,157.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 81.677	48.6040	14,581.20
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.3125	5,009.37
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/06 DTD 5/01/82	35.0060	10,501.80
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	42.9860	10,746.50
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.6010	280.05

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	238-78-8845

MR NICK JOE RAHALL II
110 1/2 MAIN ST
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YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/90 THRU 6/30/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV 0Y-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.2500	3,262.50

VALUE OF PRICED SECURITIES 118,645.17

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WITH THE STOCK MARKET'S CLIMB DURING THE PAST SEVERAL MONTHS, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? NOW'S A GOOD TIME TO REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT. CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6539-9650	236-78-8845	

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$117,077.59		$104,944.58	$222,022.17

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	102,037.32	104,944.58
TOTAL MONEY MARKET		104,944.58

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	150.00CR	1,111.75CR
CORP INTEREST CREDITED	.00	538.85CR
CEF DIVIDENDS CREDITED	959.00CR	8,145.00CR
AVERAGE YIELD 6/16/90 TO 7/16/90 7.50%		

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 02	2	DIVIDEND		GANNETT CO INC DEL QUANTITY 500			150.00
7 03	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	150.00	
7 03	2	PURCHASE	5	PUT STD&POORS 100 IND $340 EXP 07/21/90	3.1250	1,633.47	
7 05	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		1,833.47
7 05	2	PURCHASE	200	BROWNING-FERRIS INDUSTRIES INC	45.7500	9,308.40	
7 05	2	PURCHASE	5	PUT STD&POORS 100 IND $335 EXP 07/21/90	3.5000	1,823.67	
7 05	2	SALE	5-	PUT STD&POORS 100 IND $340 EXP 07/21/90	4.8750		2,339.07
7 06	1	RECEIVED	500	FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA			
7 06	1	RECEIVED	180	SANTA FE PACIFIC CORP			
7 06	1	RECEIVED	900	SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 18.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
7 06	2	SHORT SALE	2-	CALL BROWNING-FERRIS IND $50 EXP 09/22/90	.7500		109.99
7 06	2	SALE	5-	PUT STD&POORS 100 IND $335 EXP 07/21/90	3.2500		1,565.75

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WF

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6539-9650	236-78-8645	

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 10	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	2,191.14	
7 12	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,308.40
7 13	2	PURCHASE	2	PUT STD&POORS 100 IND $345 EXP 08/18/90	5.1250	1,075.88	
7 16	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		1,075.88
7 17	1	DIVIDEND	959	REINVESTED DIVIDEND CEF AS OF 7/16/90			
7 19	2	SALE	2-	PUT STD&POORS 100 IND $345 EXP 08/18/90	5.3750		1,034.96
7 23	2	SALE	300-	INTERPUBLIC GRP CO INC AS OF 7/20/90	35.0000		10,317.43
7 23	2	EXPIRED	5	CALL GANNETT CO INC DEL $45 EXP 07/21/90 AS OF 7/21/90			
7 23	2	EXPIRED	2	CALL HILTON HOTELS $55 EXP 07/21/90 AS OF 7/21/90			
7 23	2	EXPIRED	3	CALL INTERPUBLIC GRP CO $35 EXP 07/21/90 AS OF 7/21/90			
7 23	2	EXPIRED	1	CALL TIME WARNER $105 EXP 07/21/90 AS OF 7/21/90			
7 23	2	SHORT SALE	1-	CALL TIME WARNER $105 EXP 12/22/90	3.1250		272.48
7 24	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	1,307.44	
7 27	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	10,317.43	
	1	NET JOURNALS		TRF TO CASH ACCT			1,948.26
	2	NET JOURNALS		TRF FRM MARGIN ACCT		1,948.26	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	55.5000	11,100.00
2	200		BROWNING-FERRIS INDUSTRIES INC	41.6250	8,325.00
1	25000		CHAMPION SPORTS INC	.0310	775.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA. 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
8K08 8539-9850	236-78-8645	

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	36.2500	18,125.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	46.1250	9,225.00
1	180		SANTA FE PACIFIC CORP	19.0000	3,420.00
2	100		TIME WARNER INC	91.3750	9,137.50
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 08/18/90	.1875	37.50-
2		2	CALL BROWNING-FERRIS IND $50 EXP 09/22/90	.2500	50.00-
2		1	CALL TIME WARNER $105 EXP 12/22/90	2.2500	225.00-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 8/01/83 CALL 4/01/93 @ 30.458	22.5040	11,252.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.877	49.1490	14,744.70
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.4375	5,053.12
1	900		SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88	110.6250	995.62

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE
BK08 6539-9650	236-78-8845	

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/90 THRU 7/31/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	36.0040	10,801.20
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	43.4360	10,859.50
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	5.6580	282.90
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	7.3190	3,293.55
			VALUE OF PRICED SECURITIES		117,077.59

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND WILL BEGIN IN AUGUST TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FORM ID WFSIC

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 6539-9650	236-76-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$112,716.20		$100,660.30	$213,376.50

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	104,944.58	100,660.30
TOTAL MONEY MARKET		100,660.30

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	1,111.75CR
CORP INTEREST CREDITED	.00	535.85CR
CEF DIVIDENDS CREDITED	601.72CR	6,746.72CR
AVERAGE YIELD ON MONEY MARKET	7/17/90 TO 8/15/90	7.36%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 02	2	PURCHASE	100	HILTON HOTELS CORP COM	46.6250	4,654.32	
8 02	2	PURCHASE	7	CALL STD&POORS 100 IND $340 EXP 08/18/90	3.0000	2,208.27	
8 03	1	SALE	100-	SANTA FE PACIFIC CORP	18.8750		1,839.77
8 03	1	SALE	80-	SANTA FE PACIFIC CORP	18.8750		1,471.82
8 03	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,208.27
8 03	2	SHORT SALE	3-	CALL HILTON HOTEL $55 EXP 10/20/90	.5000		109.98
8 03	2	SALE	7-	CALL STD&POORS 100 IND $340 EXP 08/18/90	1.6250		1,073.10
8 07	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	1,183.09	
8 08	2	PURCHASE	500	INTERNATIONAL MOBILE MACHINES	5.5000	2,855.39	
8 08	2	PURCHASE	500	NATIONAL MEDIA CORP	7.2500	3,742.09	
8 08	2	SHORT SALE	2-	CALL A M R CORP $85 EXP 02/16/91	1.6250		284.98
8 09	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		4,369.34
8 10	2	PURCHASE	10	CALL STD&POORS 100 IND $325 EXP 08/18/90	2.1875	2,300.76	
8 14	2	SALE	500-	NATIONAL MEDIA CORP	8.5000		4,124.55
8 14	2	SALE	5-	CALL STD&POORS 100 IND	1.6250		766.57

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM ID 4450

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL

DUPLICATE FOR THE ACCOUNT OF
NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 14	2	SALE	5-	$325 EXP 08/18/90 CALL STD&POORS 100 IND $325 EXP 08/18/90	2.5000		1,204.05
8 15	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		3,616.03
8 16	1	DIVIDEND	601.72	REINVESTED DIVIDEND CEF AS OF 8/15/90			
8 20	2	EXPIRED	2	CALL A M R CORP $65 EXP 08/18/90 AS OF 8/18/90			
8 21	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	4,124.55	
8 22	1	EXCHANGE	900-	SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
8 22	1	EXCHANGE	900	SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
	1	NET JOURNALS		TRF FRM CASH ACCT		8,197.59	
	2	NET JOURNALS		TRF TO MARGIN ACCT			8,197.59

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	44.8750	8,975.00
2	200		BROWNING-FERRIS INDUSTRIES INC	37.8750	7,575.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	34.2500	17,125.00
1	1700		GULF BROADCAST CO LIQ	N/A	
2	300		HILTON HOTELS CORP COM	35.3750	10,612.50
2	500		INTERNATIONAL MOBILE MACHINES	5.7500	2,875.00
2	100		TIME WARNER INC	78.8750	7,887.50

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ADDITIONAL INFORMATION PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST. RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
BK08 6539-9650	236-78-8845

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 02/16/91	.8750	175.00-
2		2	CALL BROWNING-FERRIS IND $50 EXP 09/22/90	.0625	12.50-
2		3	CALL HILTON HOTEL $55 EXP 10/20/90	.1875	56.25-
2		1	CALL TIME WARNER $105 EXP 12/22/90	.7500	75.00-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	22.4380	11,219.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/88 @ 91.677	48.8990	14,669.70
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/28 DTD 6/28/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00
1	900		SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88	103.7500	933.75
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 8% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/88 FC 10/15/88	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	34.1570	10,247.10

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER
8K08 8539-9850	236-78-8645

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

YOUR FINANCIAL CONSULTANT
EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF** NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/90 THRU 8/31/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	44.5130	11,128.25
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.2200	311.00
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0570	3,625.65
			VALUE OF PRICED SECURITIES		112,716.20

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

AS A SPECIAL SERVICE TO OUR CLIENTS, THE CASH EQUIVALENT MONEY MARKET FUND HAS BEGUN TO REINVEST BOTH DOLLARS AND CENTS OF ALL DIVIDENDS, THUS ELIMINATING THE NEED TO CARRY ANY CENTS OVER TO THE NEXT DIVIDEND REINVESTMENT DATE.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FORM ID WFS01C

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9850	238-78-6845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$130,861.17	$7,091.82DB	$128,535.77	$250,305.12

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	.00	7,091.82DB
NET CLOSING BALANCE		7,091.82DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	100,880.30	128,535.77
TOTAL MONEY MARKET		128,535.77

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	115.00CR	1,228.75CR
CORP INTEREST CREDITED	72.00CR	810.85CR
CEF DIVIDENDS CREDITED	687.11CR	7,413.83CR
AVERAGE YIELD ON MONEY MARKET	8/16/90 TO 9/17/90	7.29%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 04	1	INTEREST		SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88 QUANTITY 900			72.00
9 04	1	INTEREST		SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88 QUANTITY 900			72.00
9 05	1	ADJ INTEREST		SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88 QUANTITY 900		72.00	
9 10	2	DIVIDEND		TIME WARNER INC			25.00

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FORM 3

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				QUANTITY 100			
9 11	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	97.00	
9 14	1	DEPOSIT		FUNDS RECD			32,000.00
9 14	2	PURCHASE	100	BROWNING-FERRIS INDUSTRIES INC	32.1250	3,294.84	
9 14	2	PURCHASE	200	HILTON HOTELS CORP COM	30.1250	6,188.48	
9 17	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	32,000.00	
9 17	2	SALE	500-	INTERNATIONAL MOBILE MACHINES	5.1250		2,482.48
9 18	1	DIVIDEND	667.11	REINVESTED DIVIDEND CEF AS OF 9/17/90			
9 21	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		9,481.12
9 21	2	DIVIDEND		HILTON HOTELS CORP COM QUANTITY 300			90.00
9 24	2	PURCHASE	100	TIME WARNER INC	70.0000	7,091.82	
9 24	2	EXPIRED	2	CALL BROWNING-FERRIS IND $50 EXP 09/22/90 AS OF 9/22/90			
9 25	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	2,572.48	
	1	NET JOURNALS		TRF FRM CASH ACCT		6,853.84	
	2	NET JOURNALS		TRF TO MARGIN ACCT			6,883.84

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		A M R CORP DEL	42.2500	8,450.00
2	300		BROWNING-FERRIS INDUSTRIES INC	30.7500	9,225.00
1	25000		CHAMPION SPORTS INC	.0312	780.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	30.8750	15,437.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	500		HILTON HOTELS CORP COM	29.7500	14,875.00
2	200		TIME WARNER INC	70.2500	14,050.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9850	236-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		2	CALL A M R CORP $65 EXP 02/16/91	.3125	62.50-
2		3	CALL HILTON HOTEL $55 EXP 10/20/90	.0625	18.75-
2		1	CALL TIME WARNER $105 EXP 12/22/90	.3125	31.25-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	23.3590	11,679.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	48.7630	14,628.90
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00
1	900		SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88	104.1250	937.12
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	70.0000	10,500.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	33.8950	10,168.50

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Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 8539-9850	238-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/90 THRU 9/30/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	45.0000	11,250.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.0730	303.65
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	3,613.50

VALUE OF PRICED SECURITIES 130,861.17

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

CURRENTLY, YOUR ACCOUNT'S INVESTMENT OBJECTIVE (EXPLAINED ON THE BACK) APPEARS ON EACH PAGE. IRAS NORMALLY SEEK "QUALITY INCOME" OR "QUALITY INCOME AND/OR GROWTH." OTHER OBJECTIVES REPRESENT UNUSUAL RISK FOR IRAS. FOR DETAILS, CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST. RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	238-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF*

NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV
25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$132,194.60		$107,226.93	$239,421.53

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	7,091.82DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	126,535.77	107,226.93
TOTAL MONEY MARKET		107,226.93

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	198.00CR	1,424.75CR
CORP INTEREST CREDITED	661.65CR	1,272.30CR
CEF DIVIDENDS CREDITED	883.94CR	8,097.77CR
AVERAGE YIELD ON MONEY MARKET	9/18/90 TO 10/15/90	7.25%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		7,091.82
10 01	2	DIVIDEND		GANNETT CO INC DEL QUANTITY 500			150.00
10 02	1	EXCHANGE	200	SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
10 02	1	EXCHANGE	900-	SANTA FE SOUTHERN XXX PACIFIC CORP SUB DEBS (TENDER ONLY) CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
10 02	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	150.00	
10 02	1	REDEMPTION		$26.26P/1M SANTA FE			18.87
10 03	1	EXCHANGE	47	SANTA FE PACIFIC CORP			
10 05	1	SALE	47-	SANTA FE PACIFIC CORP	13.8750		612.10
10 05	2	DIVIDEND		BROWNING-FERRIS			48.00

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FORM-D 4/75

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-6645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				INDUSTRIES INC QUANTITY 300			
10 08	1	CASH IN LIEU		CIL13.875P/S SANTA FE			1.02
10 09	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	67.69	
10 10	2	SALE	5-	CALL STD&POORS 100 IND $290 EXP 10/20/90	5.7500		2,771.11
10 10	2	PURCHASE	5	CALL STD&POORS 100 IND $290 EXP 10/20/90	4.3750	2,281.59	
10 12	2	PURCHASE	200	BROWNING-FERRIS INDUSTRIES INC	27.7500	5,664.46	
10 12	2	COVER SHORT	2	CALL A M R CORP $65 EXP 02/16/91	.2500	50.00	
10 15	1	INTEREST		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86 QUANTITY 15000			661.65
10 15	2	SALE	200-	A M R CORP DEL AS OF 10/12/90	40.3750		7,955.09
10 15	2	SALE	7-	CALL STD&POORS 100 IND $285 EXP 10/20/90	3.7500		2,508.40
10 15	2	PURCHASE	7	CALL STD&POORS 100 IND $285 EXP 10/20/90	2.7500	2;030.30	
10 16	1	DIVIDEND	683.94	REINVESTED DIVIDEND CEF AS OF 10/15/90			
10 16	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	2,191.37	
10 16	2	PURCHASE	200	SBARRO INC	23.7500	4,869 46	
10 16	2	PURCHASE	50	SBARRO INC	23.7500	1,217.36	
10 16	2	SALE	5-	CALL STD&POORS 100 IND $285 EXP 10/20/90	2.4375		1,164.34
10 16	2	PURCHASE	5	CALL STD&POORS 100 IND $285 EXP 10/20/90	3.3750	1,773.11	
10 17	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		808.77
10 22	2	PURCHASE	300	HILTON HOTELS CORP COM	30.7500	9,381.85	
10 22	2	PURCHASE	200	TIME WARNER INC	70.2500	14,213.24	
10 22	2	EXPIRED	3	CALL HILTON HOTEL $55 EXP 10/20/90 AS OF 10/20/90			
10 22	2	SHORT SALE	5-	CALL HILTON HOTEL $35 EXP 12/22/90	.7500		333.20
10 22	2	SHORT SALE	2-	CALL TIME WARNER $75 EXP 12/22/90	3.2500		805.45

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-6645	TRADING & SPECULATION	EDWARD Q RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	3

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 23	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,857.54
10 23	2	SHORT SALE	1-	CALL TIME WARNER $90 EXP 12/22/90	1.2500		84.99
10 24	2	PURCHASE	50	SBARRO INC	26.2500	1,352.50	
10 24	2	SALE	200-	TIME WARNER INC	75.7500		14,945.44
10 25	2	PURCHASE	3	CALL STD&POORS 100 IND $300 EXP 11/17/90	5.3750	1,674.16	
10 25	2	PURCHASE	2	CALL STD&POORS 100 IND $300 EXP 11/17/90	5.8750	1,216.10	
10 26	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		2,805.27
10 26	2	SALE	2-	CALL STD&POORS 100 IND $300 EXP 11/17/90	4.0000		759.97
10 29	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		22,835.12
10 29	2	SHORT SALE	3-	CALL HILTON HOTEL $35 EXP 01/19/91	.8125		203.74
10 30	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	203.74	
10 31	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	13,592.94	
	1	NET JOURNALS		TRF FRM CASH ACCT		21,286.22	
	2	NET JOURNALS		TRF TO MARGIN ACCT			21,286.22

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	500		BROWNING-FERRIS INDUSTRIES INC	27.8750	13,937.50
1	25000		CHAMPION SPORTS INC	.0312	780.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	31.1250	15,562.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	800		HILTON HOTELS CORP COM	28.8750	23,100.00
2	300		SBARRO INC	25.7500	7,725.00
2	200		TIME WARNER INC	69.0000	13,800.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
2		5	CALL HILTON HOTEL $35 EXP 12/22/90	.3125	156.25-
2		3	CALL HILTON HOTEL $35 EXP 01/19/91	.6875	206.25-
2	3		CALL STD&POORS 100 IND $300 EXP 11/17/90	2.3750	712.50
2		1	CALL TIME WARNER $105 EXP 12/22/90	.4375	43.75-
2		1	CALL TIME WARNER $90 EXP 12/22/90	.5000	50.00-
2		2	CALL TIME WARNER $75 EXP 12/22/90	2.0625	412.50-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	23.5570	11,778.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	49.0260	14,707.80
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 8/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.5000	5,075.00
1	200		SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88	105.7500	211.50
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/88 FC 10/15/88	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	34.9650	10,489.50

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9850	238-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/90 THRU 10/31/90	5

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	45.0000	11,250.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.4010	320.05
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0300	3,613.50
			VALUE OF PRICED SECURITIES		132,194.60

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

TO AVOID POSSIBLE FUTURE IRA INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

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Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9680	238-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$126,770.35	$14,606.50CR	$111,850.37	$253,227.22

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	.00	14,606.50CR
NET CLOSING BALANCE		14,606.50CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
CEF MONEY MKT PORTFOLIO	107,226.93	.00
GSP GOVT SEC PORTFOLIO	.00	111,850.37
TOTAL MONEY MARKET		111,850.37

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	1,424.75CR
CORP INTEREST CREDITED	6.93CR	1,279.23CR
CEF DIVIDENDS CREDITED	894.68CR	8,792.45CR
AVERAGE YIELD ON MONEY MARKET 10/16/90 TO 11/15/90		7.26%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 05	2	SALE	300-	SBARRO INC	27.7500		8,159.89
11 05	2	SALE	1-	CALL STD&POORS 100 IND $300 EXP 11/17/90	4.8750		447.48
11 05	2	COVER SHORT	1	CALL TIME WARNER $105 EXP 12/22/90	.1875	18.75	
11 06	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	428.73	
11 07	2	SALE	7-	CALL STD&POORS 100 IND $300 EXP 11/17/90	1.9375		1,289.24
11 07	2	PURCHASE	5	CALL STD&POORS 100 IND $300 EXP 11/17/90	2.8475	1,423.53	
11 08	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		134.29
11 12	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	8,159.89	
11 16	1	DIVIDEND	894.68	REINVESTED DIVIDEND CEF AS OF 11/15/90			

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707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

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BK08 8539-9850	238-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 19	1	REDEMPTION	200-	SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88			
11 19	1	REDEMPTION		SANTA FE SOUTHERN			206.00
11 20	1	INTEREST		SANTA FE SOUTHERN PACIFIC CORP SUB DEBS CPN 16.000% DUE 3/01/03 DTD 3/01/88 FC 9/01/88 QUANTITY 200			8.93
11 20	1	PURCHASE		CEF-MONEY MKT PORTFOLIO	1.0000	206.00	
11 21	2	PURCHASE	200	BROWNING-FERRIS INDUSTRIES INC	22.2500	4,567.25	
11 26	2	SALE	500-	HILTON HOTELS CORP COM	29.6250		14,808.50
11 26	2	COVER SHORT	5	CALL HILTON HOTEL $35 EXP 12/22/90	.1875	133.75	
11 26	2	COVER SHORT	1	CALL TIME WARNER $90 EXP 12/22/90	.3750	37.50	
11 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	118,417.62	
11 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		118,417.62
11 27	1	SALE		CEF-MONEY MKT PORTFOLIO	1.0000		164.32
11 29	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,567.25
	1	NET JOURNALS		TRF TO CASH ACCT			3,715.83
	2	NET JOURNALS		TRF FRM MARGIN ACCT		3,715.83	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	700		BROWNING-FERRIS INDUSTRIES INC	21.1250	14,787.50
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	500		GANNETT CO INC DEL	34.8750	17,437.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	300		HILTON HOTELS CORP COM	32.3750	9,712.50
2	200		TIME WARNER INC	82.5000	16,500.00

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM -D WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		3	CALL HILTON HOTEL $35 EXP 01/19/91	.7500	225.00-
2		2	CALL TIME WARNER $75 EXP 12/22/90	9.0000	1,800.00-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	23.7330	11,866.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	51.2050	15,361.50
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.2500	4,987.50
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	74.0000	11,100.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	36.0310	10,809.30
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	46.0490	11,512.25

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FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/90 THRU 11/30/90	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.4120	320.60
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0580	3,625.20
			VALUE OF PRICED SECURITIES		126,770.35

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

TO AVOID POSSIBLE FUTURE IRS INQUIRIES, PLEASE TAKE A MINUTE TO VERIFY THAT THE TAX ID/SOCIAL SECURITY NUMBER SHOWN FOR YOUR ACCOUNT IS CORRECT. IF A DISCREPANCY EXISTS, PLEASE NOTIFY YOUR FINANCIAL CONSULTANT IMMEDIATELY.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

FORM 10 WFS

Wheat, First Securities, Inc.

707 EAST MAIN ST RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9850	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF*

NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV
25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$92,682.60	$7,211.60CR	$145,315.09	$245,209.29

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	277.74CR
MARGIN ACCT - TYPE 2	14,606.50CR	6,933.86CR
NET CLOSING BALANCE		7,211.60CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	111,850.37	145,315.09
TOTAL MONEY MARKET		145,315.09

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	140.00CR	1,564.75CR
CORP INTEREST CREDITED	.00	1,279.23CR
CEF DIVIDENDS CREDITED	277.74CR	9,070.19CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.17%
GSP DIVIDENDS CREDITED	828.05CR	828.05CR
AVERAGE YIELD ON MONEY MARKET 11/16/90 TO 12/31/90		7.03%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	14,606.50	
12 10	2	DIVIDEND		TIME WARNER INC QUANTITY 200			50.00
12 10	2	SALE	200-	GANNETT CO INC DEL	35.8750		7,040.46
12 11	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	50.00	
12 13	2	PURCHASE	100	HILTON HOTELS CORP COM	38.0000	3,890.86	
12 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,040.46	
12 17	2	COVER SHORT	2	CALL TIME WARNER $75 EXP 12/22/90	14.0000	2,855.59	
12 17	2	SHORT SALE	2-	CALL TIME WARNER $85 EXP 12/22/90	4.0000		759.97
12 18	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,095.82
12 20	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,890.86
12 24	2	SALE	200-	TIME WARNER INC AS OF 12/21/90	85.0000		16,838.19
12 24	2	EXPIRED	2	CALL TIME WARNER $85 EXP 12/22/90 AS OF 12/22/90			

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FORM 0 WFS

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	238-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 218 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 28	2	DIVIDEND		HILTON HOTELS CORP COM QUANTITY 300			90.00
12 31	1	DIVIDEND		CEF-MONEY MKT PORTFOLIO			277.74
12 31	1	DIVIDEND	828.05	REINVESTED DIVIDEND GSP			
12 31	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	16,926.19	
12 31	2	SALE	200-	HILTON HOTELS CORP COM	35.3750		6,933.86
	1	NET JOURNALS		TRF TO CASH ACCT			32,636.67
	2	NET JOURNALS		TRF FRM MARGIN ACCT		32,636.67	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	700		BROWNING-FERRIS INDUSTRIES INC	22.2500	15,575.00
1	25000		CHAMPION SPORTS INC	.0310	775.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	500		FIRST NATIONAL BANK BECKLEY, WEST VIRGINIA	N/A	
2	300		GANNETT CO INC DEL	36.1250	10,837.50
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		HILTON HOTELS CORP COM	37.2500	7,450.00
1	15		QUALIFIED HOUSING PARTNERS LIMITED PARTNERSHIP	N/A	
2		3	CALL HILTON HOTEL $35 EXP 01/19/91	3.2500	975.00-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/08 DTD 6/01/83 CALL 4/01/93 @ 30.458	24.0890	12,044.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	51.0010	15,300.30

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--- IMPORTANT ADDITIONAL INFORMATION. PLEASE SEE REVERSE SIDE

FORM 10 WFSI

Wheat, First Securities, Inc.

707 EAST MAIN ST., RICHMOND, VA. 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9850	236-78-8845	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/90 THRU 12/31/90	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	14.2500	4,987.50
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	36.5050	10,951.50
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 9/01/91 @ 51.082	47.1820	11,790.50
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/18 DTD 11/15/84	6.4120	320.60
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	8.0560	3,625.20

VALUE OF PRICED SECURITIES 92,682.60

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IT HAS BEEN A PLEASURE SERVING YOU IN 1990, AND WE WANT YOU TO KNOW THAT WE APPRECIATE YOUR BUSINESS. WE LOOK FORWARD TO SERVING YOU IN THE NEW YEAR, AND WE WILL DO EVERYTHING POSSIBLE TO MERIT THE CONFIDENCE YOU HAVE SHOWN IN US.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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SHEARSON LEHMAN HUTTON

Preferred Client FMA Statement
January 1 - January 28, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

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Account value

Stocks		$ 210 293.75
Mutual funds		9,130 00
Margin account balance		-144 038 27
Other investments		25,789 50
Net value this period*		**$ 101,174.08**
Net value last period*	**$ 125,634 23**	

*Does not include unpriced securities

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 59 00	$ 59 00	$ 0 00
Total	**$ 59.00**	**$ 59 00**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information please call your Financial Consultant

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SHEARSON LEHMAN HUTTON

January 1 - January 28, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

		Amounts added	Amounts subtracted	
Opening cash balance				**$ -142,612 67**
Deposits		.42		
Interest charged on loans			-953.45	
Gold Card payment			-531 57	
Dividends credited		59 00		
Total		$ 59 42	$ -1,485.02	
Closing cash balance				**$ -144,038 27**
Margin account balance	-144,038.27			

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/26/90

Stocks — ***Common stocks***

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 29 875	3 079%	$ 368 00	$ 11 950 00	Symbol: AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	39 125	3 067	360.00	11 737 50	Symbol: T\Rated: A-
AMGEN INC	OTC	450	51 75			23,287 50	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	104 25	46	96 00	20 850 00	Symbol: DIS\Rated: B+
GABELLI EQUITY TRUST INC	NYSE	258	12 50	8 00	258 00	3 225 00	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	30 00			15 000 00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	54 875	1 275	350.00	27,437 50	Symbol: GAP\Rated: B
LIN BROADCASTING CORP	OTC	300	104 00			31 200 00	Symbol: LINB\Rated B+
MCA INC	NYSE	200	52 875	1 286	136 00	10,575 00	Symbol MCA\Rated B+
MCI COMMUNICATIONS CORP	OTC	500	35 125			17,562 50	Symbol MCIC\Rated B-
MOBIL CORP	NYSE	100	58 125	4 473	260 00	5,812 50	Symbol MOB\Rated B
PHILADELPHIA ELECTRIC CO	NYSE	200	21 125	10 414	440 00	4,225 00	Symbol: PE\Rated A-
SCHERING PLOUGH CORP	NYSE	100	78 50	2 292	180 00	7,850 00	Symbol SGP\Rated A
SENSORMATIC ELECTRONICS CORP	OTC	1,000	11 125	449	50 00	11,125 00	Symbol: SNSR\Rated B-
SYNTEX CORP	NYSE	50	49 375	3 037	75.00	2,468 75	Symbol SYN\Rated A

SHEARSON LEHMAN HUTTON

January 1 - January 28, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks
ontinued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UNION CARBIDE CORP	NYSE	200	$ 21.375	4 678%	$ 200 00	$ 4,275 00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	34 25	2.919	50 00	1,712 50	Symbol: UPJ\Rated: A+
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In safekeeping: 1,227 Unpriced security
Total value of stocks					**$ 2,823.00**	**$ 210,293.75**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.13	$ 9,130 00	
Total value of mutual funds			**$ 9,130 00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,064 18	$ 10,641 80	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,514 77	15 147 70	In cash account
Total value of other investments			**$ 25,789.50**	

Transaction details

Deposits

Date	Description	Amount
01/23/90	GABELLI EQUITY TRUST INC ADJ REINV PRICE 13 38 TO 13.34 RECORD 12/15/89 PAY 12/29/89	$ 42

Interest charged on loans

Date	Description	Amount
01/22/90	INTEREST CHARGED FOR 24 DAY(S) FROM 12/29 THRU 1/21 @10 % CLOSING BALANCE 143 085 AVERAGE BALANCE 143,017	$ 953 45

Account number 085-03367-17 240

Gold Card activity

Gold Card number 3713 527951 21017
The following were charged or credited to your Gold Card.

Description	Reference no	Amount
BRITISH AIRWAYS UNITED KINGDOM 333.00 POUNDS STERLING BILLED AS	617310	$ 531 57
Total charges		$ 531 57
Payment for Gold Card charges 01/03/90		**$ 531 57**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/15/90	MCA INC CASH DIV ON 200 SHS RECORD 12/27/89 PAY 01/15/90	$ 34.00			$ 34.00
01/16/90	SENSORMATIC ELECTRONICS CORP CASH DIV ON 1000 SHS RECORD 12/22/89 PAY 01/16/90	25.00			25.00
Total dividends earned		**$ 59.00**	**$ 0.00**		**$ 59 00**

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 144,038 27	$ 953 45	$ 953 45
Total	**$ 144,038.27**	**$ 953.45**	**$ 953 45**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed Last period s average borrowing rate was from 10 50 % to 12 00 % Amounts borrowed on margin decrease the amount you can borrow for other purposes

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LEHMAN HUTTON

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

Account value

Stocks	$ 210,478.25
Mutual funds	9,100.00
Margin account balance	-144,826.23
Other investments	25,492.40
Net value this period*	**$ 100,244.42**
Net value last period*	**$ 101,174.98**

*Does not include unpriced securities

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 351.00	$ 410.00	$ 0.00
Total	**$ 351.00**	**$ 410.00**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -144,038.27**
Interest charged on loans		-1,138.96	
Dividends credited	351.00		
Total	$ 351.00	$ -1,138.96	
Closing cash balance			**$ -144,826.23**

Margin account balance	-144,826.23

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SHEARSON LEHMAN HUTTON

Preferred Client :
January 29 - February 25, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/23/90

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 28.00	3 285%	$ 368 00	$ 11,200 00	Symbol: AXP\Rated: A-
AMERICAN TEL & TEL CO	NYSE	300	38 125	3.147	360.00	11,437.50	Symbol: T\Rated: A-
AMGEN INC	OTC	450	55.375			24,918.75	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	104 75	.553	116.00	20,950.00	Symbol: DIS\Rated: B+
GABELLI EQUITY TRUST INC	NYSE	258	12.125	8.247	258.00	3,128.25	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	35 25			17,625 00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	50 125	1 396	350.00	25,062.50	Symbol: GAP\Rated: B
LIN BROADCASTING CORP	OTC	300	108 875			32,662 50	Symbol: LINB\Rated: B+
MCA INC	NYSE	200	52.125	1.304	136.00	10,425.00	Symbol: MCA\Rated: B+
MCI COMMUNICATIONS CORP	OTC	500	32.00			16,000.00	Symbol: MCIC\Rated: B
MOBIL CORP	NYSE	100	61 25	4 244	260 00	6,125 00	Symbol: MOB\Rated: B
PHILADELPHIA ELECTRIC CO	NYSE	200	20 00	11 00	440 00	4,000 00	Symbol PE\Rated A-
SCHERING PLOUGH CORP	NYSE	100	74 75	2.408	180.00	7,475 00	Symbol: SGP\Rated: A
SENSORMATIC ELECTRONICS CORP	OTC	1,000	10 75	2 79	300 00	10,750 00	Symbol: SNS\Rated B-
SYNTEX CORP	NYSE	50	47 375	3.166	75.00	2,368 75	Symbol. SYN\Rated: A
UNION CARBIDE CORP	NYSE	200	23 25	4.301	200 00	4,650 00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	34.00	2.941	50.00	1,700.00	Symbol: UPJ\Rated: A
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In safekeeping: 1,227 Unpriced security
Total value of stocks					**$ 3,093.00**	**$ 210,47[illegible].25**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.10	$ 9,100 00	
Total value of mutual funds			**$ 9,100.00**	

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LEHMAN BROTHERS

Account number 685-03367-17 240

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,050.10	$ 10,501 00	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,499.14	14,991 40	In cash account
Total value of other investments			**$ 25,492.40**	

Transaction details

Interest charged on loans

Date	Description	Amount
02/21/90	INTEREST CHARGED FOR 30 DAY(S) FROM 1/22 THRU 2/20 @ 9 1/2% CLOSING BALANCE 143,687 AVERAGE BALANCE 143,868	$ 1,138 96

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/01/90	AMERICAN TEL & TEL CO CASH DIV ON 300 SHS RECORD 12/29/89 PAY 02/01/90	$ 90.00			$ 90.00
02/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 500 SHS RECORD 01/12/90 PAY 02/01/90	87 50			87 50
02/01/90	UPJOHN CO CASH DIV ON 50 SHS RECORD 01/10/90 PAY 02/01/90	12 50			12.50
02/09/90	AMERICAN EXPRESS CO CASH DIV ON 400 SHS RECORD 01/05/90 PAY 02/09/90	92.00			92.00

LEHMAN HUTTON

Account number 685-03367-17 240

Dividends *continued*

Date	Description	Taxable	Non-taxable	Comment	Amount
02/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 01/12/90 PAY 02/15/90	$ 24.00			$ 24.00
02/20/90	SCHERING PLOUGH CORP CASH DIV ON 100 SHS RECORD 02/02/90 PAY 02/20/90	45.00			45.00
Total dividends earned		**$ 351.00**	**$ 0.00**		**$ 351.00**

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 144,826.23	$ 1,138.98	$ 2,092.41
Total	**$ 144,826.23**	**$ 1,138.98**	**$ 2,092.41**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN HUTTON

Preferred Client Firm Statement
February 26 - March 31, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 199,135.50
Mutual funds		9,230.00
Margin account balance		-122,168.01
Other investments		25,214.90
Net value this period*		**$ 111,412.39**
Net value last period*	**$ 100,244.42**	

*Does not include unpriced securities

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 373.75	$ 783.75	$ 0.00
Total	**$ 373.75**	**$ 783.75**	**$ 0.00**

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Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -144,826.23**
Securities bought and other subtractions		0.00	
Securities sold and other additions	25,310.17		
Withdrawals		-2,000 00	
Interest charged on loans		-1,025 70	
Dividends credited	373 75		
Total	$ 25,683.92	$ -3,025 70	
Closing cash balance			**$ -122,168 01**

Margin account balance -122,168 01

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/30/90

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 25 75	3 572%	$ 368 00	$ 10,300 00	Symbol AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	42.00	3.142	396.00	12,600 00	Symbol. T\Rated: A-
AMGEN INC	OTC	450	61 75			27,787 50	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	111.125	521	116 00	22,225 00	Symbol: DIS\Rated. B+
GABELLI EQUITY TRUST INC	NYSE	258	12 00	8 333	258 00	3 096 00	Symbol GAB
GENETICS INSTITUTE INC	OTC	500	38 75			19,375 00	Symbol GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	53 00	1 32	350 00	26 500 00	Symbol GAP\Rated B+
LIN BROADCASTING CORP	OTC	158	81 50			12 877 00	Symbol. LINB\Rated B+
MCA INC	NYSE	200	51 00	1 333	136 00	10 200 00	Symbol MCA\Rated B+
MCI COMMUNICATIONS CORP	OTC	500	36 75			18 375 00	Symbol MCIC\Rated B
MOBIL CORP	NYSE	100	61 50	4 227	260 00	6,150 00	Symbol MOB\Rated B
SCHERING PLOUGH CORP	NYSE	100	80 625	2 232	180 00	8 062 50	Symbol SGP\Rated A
SENSORMATIC ELECTRONICS CORP	OTC	1 000	12 75	2 352	300 00	12 750 00	Symbol SNSR\Rated B
SYNTEX CORP	NYSE	50	50 875	2 948	75 00	2,543 75	Symbol SYN\Rated A

Account number 685-03367-17 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UNION CARBIDE CORP	NYSE	200	$ 21.75	4 597%	$ 200 00	$ 4,350.00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	38.875	2.572	50.00	1,943.75	Symbol: UPJ\Rated: A
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In safekeeping: 1,227 Unpriced security
Total value of stocks					**$ 2,689.00**	**$ 199,135.50**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.23	$ 9,230.00	
Total value of mutual funds			**$ 9,230.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1.042.02	$ 10.420.20	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,479.47	14.794 70	In cash account
Total value of other investments			**$ 25,214.90**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
03/09/90	Sold	PHILADELPHIA ELECTRIC CO	200	$ 17.50	$ 3,426 55
03/14/90	Tender	LIN BROADCASTING CORP	142		21,883 62
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 25,310 17**

Withdrawals

Date	Description	Reference no	Amount
03/07/90	MOVEMENT TO RETIREMENT ACCT FROM 685-03367 TO 685-60527		**$ 2,000 00**

Account number 685-03367-17 240

Interest charged on loans

Date	Description	Amount
03/21/90	INTEREST CHARGED FOR 28 DAY(S) FROM 2/21 THRU 3/20 @ 9 1/2% CLOSING BALANCE 121,372 AVERAGE BALANCE 138,817	$ 1,025 70

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
03/01/90	SENSORMATIC ELECTRONICS CORP CASH DIV ON 1000 SHS RECORD 02/15/90 PAY 03/01/90	$ 10.00			$ 10.00
03/01/90	UNION CARBIDE CORP CASH DIV ON 200 SHS RECORD 02/07/90 PAY 03/01/90	50.00			50 00
03/12/90	MOBIL CORP CASH DIV ON 100 SHS RECORD 02/05/90 PAY 03/12/90	65 00			65 00
03/12/90	SYNTEX CORP CASH DIV ON 50 SHS RECORD 02/16/90 PAY 03/12/90	18.75			18 75
03/26/90	GABELLI VALUE FUND INC CASH DIV ON 1000 SHS RECORD 03/19/90 PAY 03/26/90	120 00			120 00
03/30/90	PHILADELPHIA ELECTRIC CO CASH DIV ON 200 SHS RECORD 02/21/90 PAY 03/30/90	110.00			110 00
Total dividends earned		**$ 373.75**	**$ 0.00**		**$ 373 75**

Account number 685-03367-17 240

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 122,168.01	$ 1,025.70	$ 3,118.11
Total	**$ 122,168.01**	**$ 1,025.70**	**$ 3,118.11**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

LEHMAN HUTTON

April 1 - April 29, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks	$ 194,851.75
Mutual funds	24,270.00
Margin account balance	-139,106.22
Other investments	25,014.20
Net value this period*	**$ 105,029.73**
Net value last period*	**$ 111,412.39**

**Does not include unpriced securities*

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 173.75	$ 957.50	$ 0.00
Total	**$ 173.75**	**$ 957.50**	**$ 0.00**

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LEHMAN BROTHERS

April 1 - April 29, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -122,168.01**
Securities bought and other subtractions		-16,000 00	
Automatic reinvestments		-64.75	
Securities sold and other additions	16.65		
Interest charged on loans		-1,064.06	
Dividends credited	173.75		
Total	$ 190.60	$ -17,128.81	
Closing cash balance			**$ -139,106.22**

Margin account balance -139,106.22

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/27/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 26 375	3.468%	$ 368.00	$ 10,550 00	Symbol: AXP\Rated: A-
AMERICAN TEL & TEL CO	NYSE	300	39 875	3.31	396.00	11,962.50	Symbol: T\Rated. A-
AMGEN INC	OTC	450	61.75			27,787.50	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	109.625	.529	116.00	21,925.00	Symbol: DIS\Rated: B+
GABELLI EQUITY TRUST INC	NYSE	264	11.50	8.695	264.00	3,036.00	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	35.25			17,625.00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	53.00	1.32	350.00	26,500.00	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	158	61 875			9,776.25	Symbol: LINB\Rated: B+
MCA INC	NYSE	200	54.625	1.244	136.00	10,925.00	Symbol: MCA\Rated: B+
MCI COMMUNICATIONS CORP	OTC	500	34.625			17,312.50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	24.875			2,089.50	Symbol: MCAWA
MOBIL CORP	NYSE	100	60.00	4.333	260.00	6,000.00	Symbol: MOB\Rated: B
SCHERING PLOUGH CORP	NYSE	100	81.75	2.77	226.50	8,175.00	Symbol: SGP\Rated: A

LEHMAN HUTTON

Preferred Client Firm Statement
April 1 - April 29, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
SENSORMATIC ELECTRONICS CORP	OTC	1,000	$ 13.00	2.307%	$ 300.00	$ 13,000.00	Symbol: SNSR\Rated: B-
SYNTEX CORP	NYSE	50	49.50	3.232	80.00	2,475 00	Symbol: SYN\Rated A
UNION CARBIDE CORP	NYSE	200	19.50	5 128	200 00	3 900.00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	36.25	2.758	50.00	1,812.50	Symbol: UPJ\Rated: A
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In safekeeping 1,227 Unpriced security
Total value of stocks					**$ 2,746 50**	**$ 194,851.75**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9 19	$ 9,190.00	
SMALLCAP WORLD FUND INC	1,000	15.08	15,080 00	In cash account
Total value of mutual funds			**$ 24,270.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,027.86	$ 10,278 60	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,473 56	14,735.60	In cash account
Total value of other investments			**$ 25,014.20**	

SHEARSON LEHMAN HUTTON

Preferred Client Fin... April 1 - April 29, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
04/11/90	Spinoff	MCCAW CELLULAR COMMUNICATIONS INC CL A SPINOFF ON 158 SHS RECORD 03/20/90 PAY 04/03/90	84		$ 0.00
04/11/90	Cashinlieu	MCCAW CELLULAR COMMUNICATIONS INC CL A CASH IN LIEU OF .60742 RECORD 03/20/90 PAY 04/03/90			16.85
04/27/90	Bought	SMALLCAP WORLD FUND INC CONFIRM #040574 DIVIDENDS IN CASH AS OF 04/20/90	1,000	16.00	-16,000.00
Total securities bought and other subtractions					**$ -16,000.00**
Total securities sold and other additions					**$ 16.85**

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Hutton on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
04/05/90	GABELLI EQUITY TRUST INC 5 4136 SHRS @ $11.96	6	$ 11 96	$ -64 75
Total automatic reinvestments				**$ -64 75**

Interest charged on loans

Date	Description	Amount
04/23/90	INTEREST CHARGED FOR 33 DAY(S) FROM 3/21 THRU 4/22 @ 9 1/2% CLOSING BALANCE 122,042 AVERAGE BALANCE 122,189	**$ 1,064.06**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.***

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
04/05/90	GABELLI EQUITY TRUST INC CASH DIV RECORD 03/16/90 PAY 03/30/90	$ 64.75			$ 64.75
04/16/90	MCA INC CASH DIV ON 200 SHS RECORD 03/28/90 PAY 04/16/90	34.00			34.00
04/17/90	SENSORMATIC ELECTRONICS CORP CASH DIV ON 1000 SHS RECORD 03/26/90 PAY 04/17/90	75.00			75.00
Total dividends earned		**$ 173.75**	**$ 0.00**		**$ 173.75**

Credit resources

Please retain this information for your records

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 139,106.22	$ 1,064.06	$ 4,182.17
Total	**$ 139,106.22**	**$ 1,064.06**	**$ 4,182.17**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

Preferred Client FMA Statement

April 30 - May 27, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 215,883.25
Mutual funds		25,040.00
Margin account balance		-139,739.81
Other investments		25,252.90
Net value this period*		**$ 126,438.34**
Net value last period*	**$ 105,029.73**	

*Does not include unpriced securities

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

		This year	
	This period	Taxable	Non-taxable
Dividends	$ 376.00	$ 1,333.50	$ 0.00
Total	**$ 376.00**	**$ 1,333.50**	**$ 0.00**

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Preferred Client FMA Statement

April 30 - May 27, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -139,106 22**
Interest charged on loans		-1,009 59	
Dividends credited	376 00		
Total	$ 376.00	$ -1,009.59	
Closing cash balance			**$ -139,739 81**

Margin account balance -139,739.81

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/25/90.

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 29 375	3 131%	$ 368 00	$ 11,750 00	Symbol AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	41 625	3 171	396.00	12,487 50	Symbol T\Rated A-
AMGEN INC	OTC	450	74.625			33,581 25	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	117 625	.493	116 00	23,525.00	Symbol: DIS\Rated B+
GABELLI EQUITY TRUST INC	NYSE	264	12.375	8.08	264.00	3,267 00	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	38 75			19,375.00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	56.875	1.23	350.00	28,437 50	Symbol: GAP\Rated B+
LIN BROADCASTING CORP	OTC	158	70 25			11,099.50	Symbol LINB\Rated B+
MCA INC	NYSE	200	59 50	1 142	136 00	11,900 00	Symbol: MCA\Rated B+
MCI COMMUNICATIONS CORP	OTC	500	41.375	.12	25 00	20,687 50	Symbol MCIC\Rated B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	28 25			2,373.00	Symbol: MCAWA
MOBIL CORP	NYSE	100	60 75	4.773	290 00	6,075.00	Symbol MOB\Rated B
SCHERING PLOUGH CORP	NYSE	100	89 375	2 534	226 50	8,937 50	Symbol SGP\Rated A
SENSORMATIC ELECTRONICS CORP	OTC	1,000	13 625	2 201	300 00	13,625 00	Symbol SNSR\Rated B-
SYNTEX CORP	NYSE	50	56 75	2 819	80 00	2,837 50	Symbol SYN\Rated A
UNION CARBIDE CORP	NYSE	200	19 875	5 031	200 00	3,975 00	Symbol UK\Rated B-

SHEARSON LEHMAN HUTTON

Preferred Client
April 30 - May 27, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UPJOHN CO	NYSE	50	$ 39.00	2.564%	$ 50.00	$ 1,950.00	Symbol: UPJ\Rated: A
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In safekeeping: 1,227 Unpriced security
Total value of stocks					**$ 2,801.50**	**$ 215,883.25**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.54	$ 9,540.00	
SMALLCAP WORLD FUND INC	1,000	15.50	15,500.00	In cash account
Total value of mutual funds			**$ 25,040.00**	

Other Investments

Description	No. of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,041.84	$ 10,418.40	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,483.45	14,834.50	In cash account
Total value of other investments			**$ 25,252.90**	

Transaction details

Interest charged on loans

Date	Description	Amount
05/21/90	INTEREST CHARGED FOR 28 DAY(S) FROM 4/23 THRU 5/20 @ 9 1/2% CLOSING BALANCE 138,786 AVERAGE BALANCE 136,636	$ 1,009.59

SHEARSON LEHMAN HUTTON

Preferred Client FMA Statement
April 30 - May 27, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
05/01/90	AMERICAN TEL & TEL CO CASH DIV ON 300 SHS RECORD 03/30/90 PAY 05/01/90	$ 99.00			$ 99.00
05/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 500 SHS RECORD 04/12/90 PAY 05/01/90	87.50			87.50
05/01/90	UPJOHN CO CASH DIV ON 50 SHS RECORD 04/09/90 PAY 05/01/90	12.50			12.50
05/10/90	AMERICAN EXPRESS CO CASH DIV ON 400 SHS RECORD 04/06/90 PAY 05/10/90	92.00			92.00
05/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 04/13/90 PAY 05/15/90	29.00			29.00
05/21/90	SCHERING PLOUGH CORP CASH DIV ON 100 SHS RECORD 05/04/90 PAY 05/21/90	56.00			56.00
Total dividends earned		**$ 376.00**	**$ 0.00**		**$ 376.00**

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 139,739.81	$ 1,009.59	$ 5,191.76
Total	**$ 139,739.81**	**$ 1,009.59**	**$ 5,191.76**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

LEHMAN HUTTON

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to.

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks	$ 222,449.75
Mutual funds	25,130.00
Margin account balance	-144,383.62
Other investments	24,763.80
Net value this period*	**$ 127,959.93**
Net value last period*	**$ 126,436.34**

**Does not include unpriced securities*

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 201 50	$ 1 535 00	$ 0 00
Total	**$ 201 50**	**$ 1,535 00**	**$ 0 00**

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LEHMAN HUTTON

CONGRESSMAN NICK JOE RAHALL

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -139,739.81**
Securities bought and other subtractions		-3,662.50	
Securities sold and other additions	0.00		
Interest charged on loans		-1,164 81	
Gold Card payment/credit adjustment		-18.00	
Dividends credited	201.50		
Total	$ 201.50	$ -4,845 31	
Closing cash balance			**$ -144,383 62**

Margin account balance -144,383.62

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/29/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 30 75	2.991%	$ 368 00	$ 12 300 00	Symbol AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	38 50	3 428	396 00	11 550 00	Symbol: T\Rated A-
AMGEN INC	OTC	500	77 75			38 875 00	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	128 25	.452	116.00	25 650 00	Symbol: DIS\Rated B+
GABELLI EQUITY TRUST INC	NYSE	264	11 75	8 51	264 00	3,102 00	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	36 625			18,312 50	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	57.125	1 225	350.00	28.562 50	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	158	74.00			11.692 00	Symbol: LINB\Rated B+
MCA INC	NYSE	200	55 50	1 225	136 00	11,100 00	Symbol: MCA\Rated: B+
MCI COMMUNICATIONS CORP	OTC	500	41.875	.119	25 00	20.937 50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	24.25			2,037 00	Symbol: MCAWA
MOBIL CORP	NYSE	100	61 75	4 696	290 00	6,175 00	Symbol: MOB\Rated: B
SCHERING PLOUGH CORP	NYSE	200	47.25	2 37	224.00	9,450.00	Symbol: SGP\Rated: A

Account number 685-03367-17 240

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
SENSORMATIC ELECTRONICS CORP	OTC	1,000	$ 13.875	2 234%	$ 310 00	$ 13,875.00	Symbol: SNSR\Rated: B-
SYNTEX CORP	NYSE	50	58 625	2.729	80.00	2,931.25	Symbol: SYN\Rated: A
UNION CARBIDE CORP	NYSE	200	19.25	5.194	200 00	3,850.00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	41.00	2.439	50.00	2,050.00	Symbol: UPJ\Rated: A
FIRST NATIONAL BANK-BECKLEY W VA		1,227					In cash account In transfer: 1,227 Unpriced security
Total value of stocks					**$ 2,809.00**	**$ 222,449.75**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.36	$ 9,360.00	
SMALLCAP WORLD FUND INC	1,000	15.77	15,770.00	In cash account
Total value of mutual funds			**$ 25,130.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,026 06	$ 10,260 60	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,450 32	14,503 20	In cash account
Total value of other investments			**$ 24,763.80**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
05/29/90	Bought	AMGEN INC ODD LOT - EXECUTED AS AGY	50	$ 72.25	$ -3,662.50
06/06/90	Stk split	SCHERING PLOUGH CORP STK SPLIT ON 100 SHS	100		0.00
Total securities bought and other subtractions					**$ -3,662 50**
Total securities sold and other additions					**$ 0 00**

LEHMAN HUTTON

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Interest charged on loans

Date	Description	Amount
06/21/90	INTEREST CHARGED FOR 31 DAY(S) FROM 5/21 THRU 6/20 @ 9 1/2% CLOSING BALANCE 143,218 AVERAGE BALANCE 142,387	$ 1,164.81

Gold Card activity

Gold Card number 3713 527951 21017
The following were charged or credited to your Gold Card.

Description	Reference no	Amount
HOLIDAY INN PRESTONSBUR PRESTONSBURG KY INV#404669	124113	$ 18.00
Total charges		$ 18.00
Payment for Gold Card charges 06/01/90		**$ 18.00**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
06/01/90	UNION CARBIDE CORP CASH DIV ON 200 SHS RECORD 05/09/90 PAY 06/01/90	$ 50.00			$ 50.00
06/11/90	MCA INC CASH DIV ON 200 SHS RECORD 05/23/90 PAY 06/11/90	34.00			34.00
06/11/90	MCI COMMUNICATIONS CORP CASH DIV ON 500 SHS RECORD 05/21/90 PAY 06/11/90	25.00			25.00
06/11/90	MOBIL CORP CASH DIV ON 100 SHS RECORD 05/11/90 PAY 06/11/90	72.50			72.50
06/11/90	SYNTEX CORP CASH DIV ON 50 SHS RECORD 05/18/90 PAY 06/11/90	20.00			20.00
Total dividends earned		**$ 201.50**	**$ 0.00**		**$ 201.50**

Account number 685-03367-17 240

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 144 383 62	$ 1 164 81	$ 6 356 57
Total	**$ 144,383.62**	**$ 1,164 81**	**$ 6,356 57**

Borrowing potential

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The interest rate we charge on the borrowed money depends on several factors including how much is borrowed Last period's average borrowing rate was from 10 00 % to 11 50 % Amounts borrowed on margin decrease the amount you can borrow for other purposes

Preferred Client FMA Statement

July 1 - July 29, 1990

Page 1 of 4

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 222,010.50
Mutual funds	24,770.00
Margin account balance	-145,527.74
Other investments	25,029.10
Net value this period	**$ 126,281.86**
Net value last period*	**$ 127,959.93**

**Does not include unpriced securities*

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 75.00	$ 1,610.00	$ 0.00
Total	**$ 75.00**	**$ 1,610.00**	**$ 0.00**

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Preferred Client FMA Statement
July 1 - July 29, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -144,383 62
Interest charged on loans		-1,219 12	
Dividends credited	75 00		
Total	$ 75 00	$ -1,219 12	
Closing cash balance			$ -145,527 74

Margin account balance -145,527.74

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 07/27/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 29 50	3 118%	$ 368 00	$ 11,800 00	Symbol AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	36 25	3.641	396 00	10,875 00	Symbol: T\Rated. A-
AMGEN INC	OTC	500	88.125			44,062 50	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	116.00	.50	116 00	23,200 00	Symbol. DIS\Rated. B+
GABELLI EQUITY TRUST INC	NYSE	264	12 125	8.247	264 00	3,201 00	Symbol GAB
GENETICS INSTITUTE INC	OTC	500	37 00			18,500 00	Symbol GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	56 375	1.419	400 00	28,187 50	Symbol GAP\Rated: B+
LIN BROADCASTING CORP	OTC	158	70 00			11,060 00	Symbol LINB\Rated B+
MCA INC	NYSE	200	51 25	1 326	136 00	10 250 00	Symbol MCA\Rated B+
MCI COMMUNICATIONS CORP	OTC	500	37 625	.132	25.00	18,812 50	Symbol MCIC\Rated B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	24.25			2,037 00	Symbol. MCAWA
MOBIL CORP	NYSE	100	64 50	4.496	290 00	6,450 00	Symbol: MOB\Rated. B
SCHERING PLOUGH CORP	NYSE	200	48.125	2 327	224 00	9,625 00	Symbol. SGP\Rated A
SENSORMATIC ELECTRONICS CORP	OTC	1,000	14.75	2 101	310 00	14,750 00	Symbol SNSR\Rated B-
SYNTEX CORP	NYSE	50	61 125	2 617	80 00	3,056 25	Symbol SYN\Rated. A

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Preferred Client FMA Statement
July 1 - July 29, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UNION CARBIDE CORP	NYSE	200	$ 20.00	5.00%	$ 200 00	$ 4,000.00	Symbol: UK\Rated: B-
UPJOHN CO	NYSE	50	42.875	2.332	50.00	2,143.75	Symbol: UPJ\Rated: A
Total value of stocks					**$ 2,859.00**	**$ 222,010.50**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 9.15	$ 9,150 00	
SMALLCAP WORLD FUND INC	1,000	15 62	15,620 00	In cash account
Total value of mutual funds			**$ 24,770 00**	

Other Investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,040 03	$ 10,400 30	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,462.88	14 628 80	In cash account
Total value of other investments			**$ 25,029.10**	

Transaction details

Other security activity

Date	Activity	Description	Quantity
07/03/90	Tfr mailed	FIRST NATIONAL BANK-BECKLEY W VA	-1,227

Interest charged on loans

Date	Description	Amount
07/23/90	INTEREST CHARGED FOR 32 DAY(S) FROM 6/21 THRU 7/22 @ 9 1/2% CLOSING BALANCE 144,308 AVERAGE BALANCE 144,369	**$ 1,219.12**

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Preferred Client FMA Statement

July 1 - July 29, 1990

CONGRESSMAN NICK JOE RAHALL

Account number 685-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge securities, not of your account. *Taxable and non-taxable designations refer to the federal income tax status of your*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
07/17/90	SENSORMATIC ELECTRONICS CORP CASH DIV ON 1000 SHS RECORD 06/21/90 PAY 07/17/90	$ 75.00			$ 75.00
Total dividends earned		**$ 75.00**	**$ 0.00**		**$ 75.00**

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 145,527.74	$ 1,219.12	$ 7,575.69
Total	**$ 145,527.74**	**$ 1,219.12**	**$ 7,575.69**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

July 30 - August 31, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 200,078.00
Mutual funds		22,600.00
Margin account balance		-146,251 62
Other investments		27,194.00
Net value this period		**$ 103,620.38**
Net value last period	$ 126,281.86	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

		This year	
	This period	Taxable	Non-taxable
Dividends	$ 454 60	$ 2,064.60	$ 0 00
Total	**$ 454.60**	**$ 2,064.60**	**$ 0.00**

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Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -145,527 74
Securities bought and other subtractions		0 00	
Automatic reinvestments		-66 10	
Securities sold and other additions	0 00		
Interest charged on loans		-1,112 38	
Dividends credited	454 60		
Total	$ 454 60	$ -1,178 48	
Closing cash balance			$ 146,251 62

Margin account balance -146 251.62

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 08 31/90

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 24 125	3 813%	$ 368 00	$ 9,650 00	Symbol AXP
AMERICAN TEL & TEL CO	NYSE	300	32 375	4 077	396 00	9 712 50	Symbol T
AMGEN INC	OTC	1,000	45 25			45,250 00	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	102 375	566	116 00	20,475 00	Symbol DIS
GABELLI EQUITY TRUST INC	NYSE	269	10 25	9 756	269 00	2 757 25	Symbol GAB
GENETICS INSTITUTE INC	OTC	500	29 25			14,625 00	Symbol GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	50 50	1.584	400 00	25,250 00	Symbol GAP
LIN BROADCASTING CORP	OTC	158	54 00			8,532 00	Symbol LINB
MCA INC	NYSE	200	42 50	1 60	136 00	8 500 00	Symbol MCA
MCI COMMUNICATIONS CORP	OTC	500	34 00	.147	25 00	17,000 00	Symbol MCIC
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	17 50			1,470 00	Symbol MCAWA
MOBIL CORP	NYSE	100	63 875	4 54	290 00	6 387 50	Symbol MOB
SCHERING PLOUGH CORP	NYSE	200	46 375	2 415	224 00	9 275 00	Symbol SGP

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Account number 685-03367-17 240

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Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
SENSORMATIC ELECTRONICS CORP	OTC	1,000	$ 13.125	2.361%	$ 310.00	$ 13,125.00	Symbol: SNSR
SYNTEX CORP	NYSE	50	56.50	2.831	80 00	2,825.00	Symbol. SYN
UNION CARBIDE CORP	NYSE	200	16.75	5 97	200 00	3,350 00	Symbol: UK
UPJOHN CO	NYSE	50	37.875	2 64	50 00	1,893.75	Symbol: UPJ
Total value of stocks					**$ 2,864.00**	**$ 200,078.00**	

Mutual unds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 8.33	$ 8,330.00	
SMALLCAP WORLD FUND INC	1,000	14.27	14,270 00	In cash account
Total value of mutual funds			**$ 22,600.00**	

Other nvestments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,116.00	$ 11,160 00	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,603.40	16,034 00	In cash account
Total value of other investments			**$ 27,194.00**	

Account number 685-03367-17 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
08/20/90	Stk split	AMGEN INC STK SPLIT ON 500 SHS	500		$ 0.00
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 0.00

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
08/06/90	GABELLI EQUITY TRUST INC 5.4553 SHRS @ $12.11	5	$ 12.116	$ -66.10
Total automatic reinvestments				$ -66.10

Interest charged on loans

Date	Description	Amount
08/21/90	INTEREST CHARGED FOR 29 DAY(S) FROM 7/23 THRU 8/20 @ 9 1/2% CLOSING BALANCE 145,139 AVERAGE BALANCE 145,356	$ 1,112.38

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
08/01/90	AMERICAN TEL & TEL CO CASH DIV ON 300 SHS RECORD 06/29/90 PAY 08/01/90	$ 99.00			$ 99.00
08/01/90	UPJOHN CO CASH DIV ON 50 SHS RECORD 07/09/90 PAY 08/01/90	12.50			12.50
08/06/90	GABELLI EQUITY TRUST INC CASH DIV RECORD 06/15/90 PAY 06/29/90	66.10			66.10

3545

Account number 685-03367-17 240

Dividends
continued

Date	Description	Taxable	Non-taxable	Comment	Amount
08/06/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 500 SHS RECORD 07/20/90 PAY 08/06/90	$ 100.00			$ 100.00
08/10/90	AMERICAN EXPRESS CO CASH DIV ON 400 SHS RECORD 07/06/90 PAY 08/10/90	92.00			92.00
08/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 07/13/90 PAY 08/15/90	29.00			29.00
08/20/90	SCHERING PLOUGH CORP CASH DIV ON 200 SHS RECORD 08/03/90 PAY 08/20/90	56.00			56.00
Total dividends earned		**$ 454.60**	**$ 0.00**		**$ 454.60**

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 146,251.62	$ 1,112.38	$ 8,688.07
Total	**$ 146,251.62**	**$ 1,112.38**	**$ 8,688.07**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

Preferred Client FMA Statement
September 1 – September 30, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
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701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center. 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 192 033 88
Mutual funds		21,450 00
Margin account balance		147,271 05
Other investments		26,676 60
Net value this period		**$ 92,689 43**
Net value last period	**$ 103,620.38**	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 176 50	$ 2,241 10	$ 0 00
Total	**$ 176 50**	**$ 2,241 10**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -146,251 82**
Interest charged on loans		-1,195.93	
Dividends credited	176 50		
Total	$ 176.50	$ -1,195 93	
Closing cash balance			**$ -147,271 05**

Margin account balance -147,271 05

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

September 1 - September 30, 1990

CONGRESSMAN

Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/28/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 21.125	4.355%	$ 368 00	$ 8 450.00	Symbol: AXP
AMERICAN TEL & TEL CO	NYSE	300	30 875	4.275	396.00	9,262.50	Symbol: T
AMGEN INC	OTC	1,000	44 75			44,750.00	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	90 625	64	116.00	18,125 00	Symbol: DIS
GABELLI EQUITY TRUST INC	NYSE	269	8.875	11.267	269.00	2,387.38	Symbol: GAB
GENETICS INSTITUTE INC	OTC	500	30 25			15,125.00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	46.125	1.734	400.00	23,062.50	Symbol: GAP
LIN BROADCASTING CORP	OTC	158	45 [illegible]5			7,149.50	Symbol: LINB
MCA INC	NYSE	200	58.75	1.157	136.00	11,750.00	Symbol: MCA
MCI COMMUNICATIONS CORP	OTC	500	31.50	.158	25.00	15,750.00	Symbol: MCIC
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	14.25			1,197.00	Symbol: MCAWA
MOBIL CORP	NYSE	100	62.875	4.612	290.00	6,287.50	Symbol: MOB
SCHERING PLOUGH CORP	NYSE	200	43.125	2.597	224.00	8,625.00	Symbol: SGP
SENSORMATIC ELECTRONICS CORP	OTC	1,000	12.75	2.431	310.00	12,750.00	Symbol: SNSR
SYNTEX CORP	NYSE	50	51.875	3.084	80.00	2,593.75	Symbol: SYN
UNION CARBIDE CORP	NYSE	200	15.00	6.666	200 00	3,000.00	Symbol: UK
UPJOHN CO	NYSE	50	35.375	2.826	50.00	1,768.75	Symbol: UPJ
Total value of stocks					**$ 2,884.00**	**$ 192,033.88**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
GABELLI VALUE FUND INC	1,000	$ 8.19	$ 8,190 00	
SMALLCAP WORLD FUND INC	1,000	13.26	13,260 00	In cash account
Total value of mutual funds			**$ 21,450.00**	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement
Service period September 30, 1990

CONGRESSMAN D.K.

Account number 685-03367-17 240

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1 098 18	$ 10,981 80	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,569 48	15,694 80	In cash account
Total value of other investments			**$ 26,676.60**	

Transaction details

Interest charged on loans

Date	Description	Amount
09/21/90	INTEREST CHARGED FOR 31 DAY(S) FROM 8/21 THRU 9/20 @ 9 1/2% CLOSING BALANCE 146,075 AVERAGE BALANCE 146,191	**$ 1,195.93**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
09/04/90	UNION CARBIDE CORP CASH DIV ON 200 SHS RECORD 08/08/90 PAY 09/01/90	$ 50.00			$ 50.00
09/10/90	MOBIL CORP CASH DIV ON 100 SHS RECORD 08/06/90 PAY 09/10/90	72.50			72.50
09/17/90	MCA INC CASH DIV ON 200 SHS RECORD 08/29/90 PAY 09/17/90	34.00			34.00
09/17/90	SYNTEX CORP CASH DIV ON 50 SHS RECORD 08/20/90 PAY 09/17/90	20.00			20.00
Total dividends earned		**$ 176.50**	**$ 0.00**		**$ 176.50**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement
September 1 - September 30, 1990

CONFIDENTIAL

Account number 685-03367-17 240

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 147,271.05	$ 1,195.93	$ 9,884.00
Total	**$ 147,271.05**	**$ 1,195.93**	**$ 9,884.00**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 10.00 % to 11.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

Preferred Client FMA Statement

October 14 - October 28, 1990

SS # 236-78 8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717 421 3100

Preferred client service center 1 800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 173 368 50
Mutual funds		13 450 00
Margin account balance		119 84 03
Other investments		28 326 30
Net value this period		**$ 95 901 77**
Net value last period	**$ 92,889 43**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Nontaxable
Dividends	$ [illegible]	$ 2 316 10	$
Total	$ 75 00	$ 2 316 10	$ 0 00

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SHEARSON LEHMAN BROTHERS

Preferred Client FMA Statement
October 1 - October 28, 1990

CONGRESSMAN NICK

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -147,271 05**
Securities bought and other subtractions		0 00	
Securities sold and other additions	28,539 01		
Interest charged on loans		-1,185 99	
Dividends credited	75 00		
Total	$ 28,614 01	$ 1,185 99	
Closing cash balance			**$ -119,843 03**

Margin account balance -119,843 03

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 10/26/90.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 18.625	4 939%	$ 368 00	$ 7,450 00	Symbol AXP\Rated: A-
AMERICAN TEL & TEL CO	NYSE	300	33 375	3 955	396 00	10,012 50	Symbol T\Rated: A-
AMGEN INC	OTC	1,000	45 75			45,750 00	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	93 00	623	116 00	18,600 00	Symbol: DIS\Rated: B+
GENETICS INSTITUTE INC	OTC	500	36 875			18,437 50	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	42 50	1 882	400 00	21,250 00	Symbol GAP\Rated: B+
LIN BROADCASTING CORP	OTC	158	45 00			7,110 00	Symbol LINB\Rated: B+
MCA INC	NYSE	200	56 50	1 203	136 00	11,300 00	Symbol MCA\Rated [illegible]+
MCI COMMUNICATIONS CORP	OTC	500	30 375	329	50 00	15,187 50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	12.75			1,071 00	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	47 375	2 364	224 00	9,475 00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	50	55.00	2 909	80 00	2,750 00	Symbol: SYN\Rated: A

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SHEARSON LEHMAN BROTHERS

Preferred Client FMA Statement

October 1 - October 29, 1990

CONGRESSMAN NICK [illegible]

Account number 685-03367-17 240

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated annual income	Market value	Comment
UNION CARBIDE CORP	NYSE	200	$ 15 50	6 451%	$ 200 00	$ 3 100 00	Symbol UK\Rated B-
UPJOHN CO	NYSE	50	37 50	2 666	50 00	1 875 00	Symbol UPJ\Rated A
Total value of stocks					**$ 2,020 00**	**$ 173,368 50**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 13 45	$ 13 450 00	in cash account
Total value of mutual funds			**$ 13,450 00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,182 93	$ 11 829 30	in cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1 709 70	[illegible]	in cash account
Total value of other investments			**$ 28 926 30**	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
10/10/90	Sold	MOBIL CORP	-100	$ 62 50	$ 6 177 69
10/17/90	Sold	GABELLI EQUITY TRUST INC PRINCIPAL - THIRD MARKET	-269	9 625	2,525 60
10/17/90	Sold	GABELLI VALUE FUND INC CONFIRM #002830091 AS OF 10/10/90	-1,000	8 14	8,140 00
10/17/90	Sold	SENSORMATIC ELECTRONICS CORP	-1 000	11 687	11 687 50
10/18/90	Redemption	GABELLI EQUITY TRUST INC 0 8548 SHRS @ $9 62		9 625	8 22
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 28 539 01**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

October [illegible] - October 28, 1990

Account number 685-03367-17 240

Interest charged on loans

Date	Description	Amount
10/22/90	INTEREST CHARGED FOR 31 DAY(S) FROM 9/21 THRU 10/21 @ 9 3/4% CLOSING BALANCE 118,657 AVERAGE BALANCE 141,258	$ 1,185 99

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
10/16/90	SENSORMATIC ELECTRONICS CORP CASH DIV ON 1000 SHS RECORD 09/25/90 PAY 10/16/90	$ 75.00			$ 75 00
Total dividends earned		**$ 75 00**	**$ 0 00**		**$ 75 00**

Credit resources

Please retain this information for your records

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 119,843 03	$ 1,185 99	$ 11,069 99
Total	**$ 119,843.03**	**$ 1,185.99**	**$ 11,069 99**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period s average borrowing rate was from 10 25 % to 11.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

October 29 - November 30, 1990

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 186,432 75
Mutual funds	14,060 00
Margin account balance	-120,426.73
Other Investments	27,628 30
Net value this period	**$ 107,694.32**
Net value last period	**$ 95,901.77**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 455 96	$ 2 772 06	$ 0 00
Total	**$ 455 96**	**$ 2,772 06**	**$ 0 00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -119,843 03**
Automatic reinvestments		-67 46	
Interest charged on loans		-972.20	
Dividends credited	455 96		
Total	$ 455.96	$ -1,039 66	
Closing cash balance			**$ -120,426 73**

Margin account balance -120,426.73

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October 29 - November 30, 1990

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 11/30/90

tocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 20 50	4 487%	$ 368.00	$ 8,200.00	Symbol: AXP\Rated: A-
AMERICAN TEL & TEL CO	NYSE	300	32.125	4.108	396 00	9,637.50	Symbol: T\Rated: A-
AMGEN INC	OTC	1,000	58.00			58,000 00	Symbol: AMGN
WALT DISNEY COMPANY	NYSE	200	99 625	.582	116 00	19,925 00	Symbol: DIS\Rated: A-
GABELLI EQUITY TRUST INC	NYSE	6	11 00	10.727	7.08	66 00	Symbol GAB
GENETICS INSTITUTE INC	OTC	500	39.50			19,750.00	Symbol: GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	39.50	2.025	400.00	19,750 00	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	158	57.75			9,124.50	Symbol LINB\Rated: B+
MCA INC	NYSE	200	66.00	1.03	136 00	13,200.00	Symbol: MCA\Rated: B+
MCI COMMUNICATIONS CORP	OTC	500	19 875	.503	50 00	9,937.50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	16.50			1,386.00	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	46.875	2.389	224 00	9,375.00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	50	60 125	2.661	80 00	3,006 25	Symbol: SYN\Rated: A
UNION CARBIDE CORP	NYSE	200	16.00	6.25	200 00	3,200.00	Symbol: UK\Rated B-
UPJOHN CO	NYSE	50	37.50	2.666	50.00	1,875.00	Symbol: UPJ\Rated: A
Total value of stocks					**$ 2,027.08**	**$ 186,432.75**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 14.06	$ 14,060 00	In cash account
Total value of mutual funds			**$ 14,060.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,143 39	$ 11,433.90	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1,619.44	16,194 40	In cash account
Total value of other investments			**$ 27,628.30**	

Transaction details

vestment
ctivity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
11/14/90	GABELLI EQUITY TRUST INC 6 5010 SHRS @ $10.37	6	$ 10 377	$ -67.46
Total automatic reinvestments				**$ -67 46**

nterest
harged
n loans

Date	Description	Amount
11/21/90	INTEREST CHARGED FOR 30 DAY(S) FROM 10/22 THRU 11/20 @ 9 3/4% CLOSING BALANCE 119,454 AVERAGE BALANCE 119,655	**$ 972.20**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
11/01/90	AMERICAN TEL & TEL CO CASH DIV ON 300 SHS RECORD 10/03/90 PAY 11/01/90	$ 99.00			$ 99 00
11/01/90	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 500 SHS RECORD 10/16/90 PAY 11/01/90	100.00			100 00
11/01/90	UPJOHN CO CASH DIV ON 50 SHS RECORD 10/08/90 PAY 11/01/90	12.50			12.50
11/09/90	AMERICAN EXPRESS CO CASH DIV ON 400 SHS RECORD 10/05/90 PAY 11/09/90	92.00			92 00
11/14/90	GABELLI EQUITY TRUST INC CASH DIV RECORD 09/14/90 PAY 09/28/90	67.46			67.46

ividends
ntinued

Date	Description	Taxable	Non-taxable	Comment	Amount
11/15/90	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 10/12/90 PAY 11/15/90	$ 29.00			$ 29.00
11/19/90	SCHERING PLOUGH CORP CASH DIV ON 200 SHS RECORD 11/02/90 PAY 11/19/90	56.00			56.00
Total dividends earned		**$ 455.96**	**$ 0.00**		**$ 455.96**

Credit resources

Please retain this information for your records.

xisting ›ans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 120,426 73	$ 972 20	$ 12,042 19
Total	**$ 120,426.73**	**$ 972.20**	**$ 12,042.19**

orrowing otential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed Last period's average borrowing rate was from 10.25 % to 11 75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

December 1 - December 31, 1990

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center 1 800 232-4454

Account number 685-03367 17 240
As you requested, co[illegible] statement have also been se[illegible]

C[illegible]IGRESSMAN NICK J RAHALL III
[illegible]MES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks		$ 194 300 50
Mutual funds		14 160 00
Margin account balance		121 287 32
Other investments		28 205 70
Net value this period		**$ 115,387 88**
Net value last period	$ 107,694 32	

Earnings summary

	This period	This year Taxable	This year Nontaxable
Dividends	$ 447 80	$ 3 219 86	$ 0 00
Total	**$ 447 80**	**$ 3 219 86**	**$ 0.00**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -120 426 73
Automatic reinvestments		2 80	
Interest charged on loans		-1 305 59	
Dividends credited	447 80		
Total	$ 447 80	$ -1 308 39	
Closing cash balance			$ -121 287 32

Margin account balance -121,287 32

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Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 12/31/90

tocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN EXPRESS CO	NYSE	400	$ 20 625	4 46 %	$ 368 00	$ 8 250 00	Symbol AXP\Rated A-
AMERICAN TEL & TEL CO	NYSE	300	30 125	4 381	396 00	9,037 50	Symbol T\Rated A
AMGEN INC	OTC	1 000	62 25			62,250 00	Symbol AMGN
WALT DISNEY COMPANY	NYSE	200	101 50	571	116 00	20 300 00	Symbol DIS\Rated A-
GABELLI EQUITY TRUST INC	NYSE	6	10 375	11 373	7 08	62 25	Symbol GAB
GENETICS INSTITUTE INC	OTC	500	41 00			20,500 00	Symbol GENI
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	44 125	1 813	400 00	22,062 50	Symbol GAP\Rated B+
LIN BROADCASTING CORP	OTC	158	61 50			9 717 00	Symbol LNB\Rated B+
MCA INC	NYSE	200	69 25	981	136 00	13 850 00	Symbol MCA\Rated B+
MCI COMMUNICATIONS CORP	OTC	500	19 625	509	50 00	9 812 50	Symbol MCIC\Rated B
MCCAW CELLULAR COMMUNICATIONS INC CL A	OTC	84	17 25			1,449 00	Symbol MCAWA
SCHERING PLOUGH CORP	NYSE	200	44 375	2 523	224 00	8 875 00	Symbol SGP\Rated A
SYNTEX CORP	NYSE	50	59 375	2 694	80 00	2 968 75	Symbol SYN\Rated A
UNION CARBIDE CORP	NYSE	200	16 375	6 106	200 00	3 275 00	Symbol UK\Rated B
UPJOHN CO	NYSE	50	38 00	3 052	58 00	1 900 00	Symbol UPJ\Rated A
Total value of stocks					**$ 2,035 08**	**$ 194 309 50**	

lutual unds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 14 16	$ 14 160 00	In cash account
Total value of mutual funds			**$ 14,160 00**	

ther nvestments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,168 36	$ 11 683 60	In cash account
SHEARSON LEHMAN FUTURES 1000FD	10	1 652 21	16 522 10	In cash account
Total value of other investments			**$ 28 205 70**	

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Account number 685-03367-17 240

Transaction details

vestment tivity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
12/31/90	GABELLI EQUITY TRUST INC 0.2667 SHRS @ $10.48		$ 10.48	$ 2.80
Total automatic reinvestments				**$ 2.80**

terest arged loans

Date	Description	Amount
12/21/90	INTEREST CHARGED FOR 30 DAY(S) FROM 11/21 THRU 12/20 @ 9 3/4% CLOSING BALANCE 119,981 AVERAGE BALANCE 120,368	[illegible]
12/31/90	INTEREST CHARGED FOR 10 DAY(S) FROM 12/21 THRU 12/30 @ 9 3/4% CLOSING BALANCE 120,959 AVERAGE BALANCE 120,959	322.60
Total interest charged on loans		**$ 1,305.59**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

vidends

Date	Description	Taxable	Non-taxable	Comment	Amount
12/03/90	UNION CARBIDE CORP CASH DIV ON 200 SHS RECORD 11/15/90 PAY 12/01/90	$ 5.00			$ 5.00
12/10/90	MCI COMMUNICATIONS CORP CASH DIV ON 500 SHS RECORD 11/16/90 PAY 12/10/90	[illegible]			[illegible]
12/10/90	SYNTEX CORP CASH DIV ON 50 SHS RECORD 11/12/90 PAY 12/10/90	[illegible]			[illegible]

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Idends
nued

Date	Description	Taxable	Non taxable	Comment	Amount
12/20/90	SMALLCAP WORLD FUND INC CASH DIV ON 1000 SHS RECORD 12/14/90 PAY 12/17/90	$ 350 00			$ 350 00
12/31/90	GABELLI EQUITY TRUST INC CASH DIV RECORD 12/17/90 PAY 12/31/90	2 80			2 80
Total dividends earned		**$ 447 80**	**$ 0 00**		**$ 447 80**

Credit resources

Please retain this information for your records.

sting ns

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 121 287 32	$ 1 305 59	$ 13,347 78
Total	**$ 121,287.32**	**$ 1 305 59**	**$ 13,347 78**

·rowing ential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose With Express Credit you may borrow an even greater amount for any personal or business use Express Credit may not be used to purchase, carry or trade in securities

The interest rate we charge on the borrowed money depends on several factors including how much is borrowed Last period's average borrowing rate was from 10 25 % to 11 75 % Amounts borrowed on margin decrease the amount you can borrow for other purposes

3562

STATEMENT DATE
1/19/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

#6

ACCOUNT NUMBER 8182402575
SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23530-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	240.78	CERTIFICATE SHARES:	.000
		CAPITAL GAINS.	.00	SHARES ON DEPOSIT	2,831.104
				TOTAL SHARES OWNED.	2,831.104

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
1/19/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

ACCOUNT NUMBER 8182402575
SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS:	240.78	CERTIFICATE SHARES.	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT.	2,831.104
				TOTAL SHARES OWNED:	2,831.104

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
2/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL CUST
REBECCA A RAHALL
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BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
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BECKLEY WV 25802-1328

ACCOUNT NUMBER: 8182402575
SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	470.10	CERTIFICATE SHARES:	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	2,862.135
				TOTAL SHARES OWNED:	2,862.135

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
3/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER: 8182402575
SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS.	.00		
		DIVIDENDS:	701.93	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT.	2,893.893
				TOTAL SHARES OWNED:	2,893.893

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

PLEASE DETACH AND REMIT WITH NEXT INVESTMENT

STATEMENT DATE
4/20/90

MFS GOVERNMENT INCOME PLUS TRUST

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25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575
SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS:	936.34	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	2,925.873
				TOTAL SHARES OWNED:	2,925.873

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

> > > > > > PLEASE DETACH AND REMIT WITH NEXT INVESTMENT < < < < < <

STATEMENT DATE
5/18/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	DIVIDENDS:	1,173.34	SHARES ON DEPOSIT:	2,959.442
		CAPITAL GAINS:	.00	TOTAL SHARES OWNED:	2,959.442

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
6/20/90

MFS GOVERNMENT INCOME PLUS TRUST

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BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 31 ACCOUNT NUMBER 8182402575

SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE.

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921

MASSACHUSETTS INVESTORS TRUST INVESTS IN QUALITY COMMON STOCKS
FOR CURRENT INCOME AND LONG-TERM GROWTH OF CAPITAL AND INCOME.
SEE YOUR INVESTMENT ADVISER OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS:	1,413.05	CERTIFICATE SHARES.	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT	2,992.921
				TOTAL SHARES OWNED.	2,992.921

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
7/20/90

MFS GOVERNMENT INCOME PLUS TRUST

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Helping investors manage money since 1924.

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25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
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BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.08	33.589	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827

MASSACHUSETTS INVESTORS TRUST INVESTS IN QUALITY COMMON STOCKS
FOR CURRENT INCOME AND LONG-TERM GROWTH OF CAPITAL AND INCOME.
SEE YOUR INVESTMENT ADVISER OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS:	1,655.48	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	3,026.827
				TOTAL SHARES OWNED:	3,026.827

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
8/20/90

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALL CUST
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25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS.	1,900.65	CERTIFICATE SHARES.	.000
		CAPITAL GAINS.	.00	SHARES ON DEPOSIT:	3,061.456
				TOTAL SHARES OWNED:	3,061.456

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I	PAID TO DATE	EXPIRATION DATE

< < < <

STATEMENT DATE
9/20/90

MFS GOVERNMENT INCOME PLUS TRUST

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25801-4611

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BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.085	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.05	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456
9/20	9/06	INCOME REINVEST	.081	247.98	6.83	36.307	3,097.763

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	DIVIDENDS:	2,148.83	SHARES ON DEPOSIT:	3,097.763
		CAPITAL GAINS:	.00	TOTAL SHARES OWNED:	3,097.763

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I	PAID TO DATE	EXPIRATION DATE

> > > > > > PLEASE DETACH AND REMIT WITH NEXT INVESTMENT < < < < < <

STATEMENT DATE
9/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
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BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: [illegible]
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.589	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456
9/20	9/06	INCOME REINVEST	.081	247.98	6.93	35.307	3,097.763
9/20	9/17	REDEMPTION THRU DLR	91605	9,902.64	6.82	1,452.000	1,645.763

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS:	2,148.63	CERTIFICATE SHARES:	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	1,645.763
				TOTAL SHARES OWNED:	1,645.763

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

. . . . . PLEASE DETACH AND RETURN WITH ABOVE INVESTMENT . . . . . .

STATEMENT DATE
10/01/90

MFS WORLDWIDE TOTAL RETURN TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL II CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 24 ACCOUNT NUMBER: 0000900113

SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				.000
9/28	9/20	PURCH THRU DEALER 90261	9,999.36	8.96	1,116.000	1,116.000
10/01	10/01	PHONE EXCHANGE ESTABLISHED				1,116.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	9,999.36		
		DIVIDENDS:	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	1,116.000
				TOTAL SHARES OWNED:	1,116.000

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

>>>>>> PLEASE DETACH AND REMIT WITH NEXT INVESTMENT <<<<<<

MFS FAMILY OF FUNDS

PANORAMA MFS

NICK JOE RAHALL II CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

STATEMENT DATE: 10/19/1990

PANORAMA NUMBER: 000163020

THE NEWEST MFS FUND, MFS WORLDWIDE TOTAL RETURN TRUST, SEEKS TOTAL RETURN BY INVESTING IN GLOBAL EQUITY AND FIXED-INCOME SECURITIES. ASK YOUR FINANCIAL ADVISER FOR DETAILS OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS.

MFS PORTFOLIO

FUND NAME AND ACCOUNT REGISTRATION	FUND SYMBOL	FUND/ACCOUNT NUMBER	CURRENT SHARES	CURRENT NET ASSET VALUE
PERSONAL INVESTMENTS				
MFS WORLDWIDE TOTAL RETURN TRUST NICK JOE RAHALL II CUST REBECCA A RAHALL UNIF GIFT TO MIN ACT WV	MWT	24/ 0000900113	1,116.000	8.59
MFS GOVERNMENT INCOME PLUS TRUST NICK JOE RAHALL CUST REBECCA A RAHALL UNIF GIFT TO MIN ACT - WV	MGP	31/ 8182402575	1,665.253	6.88

YEAR TO DATE SUMMARY

FUND SYMBOL	FUND/ACCOUNT NUMBER	INVESTMENTS	REDEMPTIONS	DISTRIBUTIONS DIVIDENDS	DISTRIBUTIONS CAPITAL GAINS	DISTRIBUTIONS TOTAL DISTRIBUTIONS
PERSONAL INVESTMENTS						
MWT	24/ 0000900113	9,999.36	.00	.00	.00	.00
MGP	31/ 8182402575	.00	9,902.64	2,281.94	.00	2,281.94
TOTAL		9,999.36	9,902.64	2,281.94	.00	2,281.94

STATEMENT DATE
10/19/1990

MFS FAMILY OF FUNDS

PANORAMA MFS
Helping investors manage money since 1924

ACTIVITY SUMMARY

STATEMENT PERIOD 07/22/90 TO 10/19/90

PERSONAL INVESTMENTS

MWT 24/ 0000900113

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		BALANCE FORWARD					.000
09/28	09/20	PURCH THRU DEALER	90261	9,999.36	8.96	1,116.000	1,116.000

MGP 31/ 8182402575

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		BALANCE FORWARD					3,026.827
08/20	08/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456
09/20	09/03	INCOME REINVEST	.081	247.98	6.83	36.307	3,097.763
09/20	09/17	REDEMPTION THRU DLR	91605	9,902.64	6.82	1,452.000	1,645.763
10/19	10/03	INCOME REINVEST	.081	133.31	6.84	19.490	1,665.253

Notice to Shareholders of MFS GOVERNMENT INCOME PLUS TRUST and MFS GOVERNMENT PREMIUM ACCOUNT *only*

MFS GOVERNMENT INCOME PLUS TRUST

MFS Government Income Plus Trust is paying a distribution of $0.081 per share today to shareholders of record October 3, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of)
$0.0390	Net investment income (non-capital gain income less expense)	$0.0390	48.9%
$0.0000	Profits from sale of securities or other assets, including options	$0.0000	0.0%
$0.0000	Other distributions**	$0.0420	51.1%
$0.0420	Paid-in-Capital	$0.0000	0.0%

MFS GOVERNMENT PREMIUM ACCOUNT

MFS Government Premium Account is paying a distribution of $0.0775 per share today to shareholders of record October 3, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of)
$0.0440	Net investment income (non-capital gain income less expense)	$0.0440	58.4%
$0.0000	Profits from sale of securities or other assets, including options	$0.0000	0.0%
$0.0000	Other distributions**	$0.0335	41.6%
$0.0335	Paid-in-Capital	$0.0000	0.0%

The source of distributions is estimated at the time of declaration. From time to time the actual results of operations will be different from these estimates. This is particularly true when capital losses incurred subsequent to a distribution offset previously declared gains from sales of securities and options transactions. The "Year To Date Distributions" column provides you with the percentage of your year to date distributions (including this distribution) by distribution source and may be different from the amounts which will be reported on your 1990 Form 1099-DIV.

In January 1991, you will receive a notice reporting the Federal tax status of this and all other distributions paid during 1990, including whether any portion of the distributions represents a non-taxable return of capital.

* The source of this distribution, determined in accordance with good accounting practice, is being disclosed as required by Section 19 of the Investment Company Act.

** Other distributions primarily are from premiums received from option contracts including those which remain open; are in excess of net investment income and profits from the sale of securities and other assets; and may be a non-taxable return of capital. A non-taxable return of capital, if any, cannot be determined until the end of the Trust's year. All or some portion of the Trust's distributions will be taxable income.

MFS GOVERNMENT INCOME PLUS TRUST
MFS GOVERNMENT PREMIUM ACCOUNT
W. Thomas London, Treasurer

October 19, 1990

MFS MUTUAL FUNDS

PANORAMA MFS
Helping investors manage money since 1924

NICK JOE RAHALL II CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

STATEMENT DATE: 11/20/1990

PANORAMA NUMBER: 000163020

ACCOUNT PORTFOLIO

FUND NAME AND ACCOUNT REGISTRATION	FUND SYMBOL	FUND/ACCOUNT NUMBER	CURRENT SHARES	CURRENT NET ASSET VALUE
PERSONAL INVESTMENTS				
MFS FAMILY OF FUNDS				
MFS WORLDWIDE TOTAL RETURN TRUST NICK JOE RAHALL II CUST REBECCA A RAHALL UNIF GIFT TO MIN ACT WV	MWT	24/ 0000900113	1,118.000	8.69
MFS GOVERNMENT INCOME PLUS TRUST NICK JOE RAHALL CUST REBECCA A RAHALL UNIF GIFT TO MIN ACT - WV	MGP	31/ 8182402575	1,883.406	5.96

YEAR TO DATE SUMMARY

FUND SYMBOL	FUND/ACCOUNT NUMBER	INVESTMENTS	REDEMPTIONS	DISTRIBUTIONS DIVIDENDS	DISTRIBUTIONS CAPITAL GAINS	TOTAL DISTRIBUTIONS
PERSONAL INVESTMENTS						
MFS FAMILY OF FUNDS						
MWT	24/ 0000900113	9,999.38	.00	.00	.00	.00
MGP	31/ 8182402575	.00	9,902.64	2,406.83	.00	2,406.83
TOTAL		9,999.38	9,902.64	2,406.83	.00	2,406.83

STATEMENT DATE
11/20/1990

MFS MUTUAL FUNDS

PANORAMA MFS

ACTIVITY SUMMARY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		STATEMENT PERIOD 10/20/90 TO 11/20/90					
		PERSONAL INVESTMENTS					
MFS FAMILY OF FUNDS							
		MWT	24/ 0000900113				
		BALANCE FORWARD -- NO ACTIVITY THIS PERIOD --					1,118.000
		MGP	31/ 8182402575				
		BALANCE FORWARD					1,865 253
11/20	11/05	INCOME REINVEST	.075	124.89	6.88	18.153	1,883 406

> > > > PLEASE DETACH AND USE TO MAKE CHANGES OR ADDITIONAL INVESTMENTS TO YOUR ACCOUNTS < < < <

☐ TO MAKE CHANGES
CHECK THIS BOX AND INDICATE ON THE REVERSE SIDE

MFS MUTUAL FUNDS

PANORAMA MFS

NICK JOE RAHALL II CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

PANORAMA NUMBER: 000183020

TO ADD TO YOUR ACCOUNT
1. INDICATE DOLLAR AMOUNT IN APPROPRIATE BOX.
2. MAKE CHECK PAYABLE TO MFS SERVICE CENTER, INC.
P.O. BOX 2281
BOSTON, MA 02107-9906

FUND SYMBOL	MINIMUM AMOUNT	FUND/ACCOUNT NUMBER	INVESTMENT AMOUNT	TAX YEAR (IRA ONLY)
MWT	$50	24/ 0000900113		****
MGP	$50	31/ 8182402575		****

NAME OF MEMBER BANK	TYPE OF CERTIFICATE
BOSTON SAFE DEPOSIT & TRUST CO ONE BOSTON PLACE BOSTON MA 02106	6 MONTH CERTIFICATE OF DEPOSIT TRANSFERABLE ONLY ON THE RECORDS OF THE INSTITUTION OR A DESIGNEE 3 MONTH EARLY WITHDRAWAL PENALTY SUBSTANTIAL PENALTY FOR EARLY WITHDRAWALS

CONFIRMATION OF SUBSCRIPTION DATE 3/12/90

ACCOUNT NUMBER	DATE OF ISSUE	RATE	AMOUNT	INTEREST PAID	MATURITY DATE
6850669216	03/12/90	8.2000	2,500.00	0.00	09/10/90

232-06-2218 SOCIAL SECURITY NO.

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

THIS DEPOSIT IS SUBJECT TO THE TERMS AND CONDITIONS DISCLOSED TO THE DEPOSITOR IN WRITING.

THIS IS A CONFIRMATION OF YOUR DEPOSIT WITH THE ABOVE BANK, WHICH WAS PURCHASED THROUGH SHEARSON LEHMAN HUTTON INC., OR ONE OF ITS AFFILIATES. ALL CERTIFICATES ARE HELD IN BOOKENTRY FORM. ANY QUESTIONS, PLEASE CALL TOLL-FREE (800) 343-9209.

THE BOSTON COMPANY
Boston Safe Deposit and Trust Company

SUPPLEMENT TO CERTIFICATE DEPOSIT ACCOUNT REGULATIONS

DATED 3/12/90

BOSTON SAFE DEPOSIT AND TRUST COMPANY ('BANK') OFFERS A SIX MONTH CERTIFICATE OF DEPOSIT ACCOUNT ('ACCOUNT') IN ACCORDANCE WITH THIS SUPPLEMENT AND THE CERTIFICATE OF DEPOSIT ACCOUNT REGULATIONS, PROVIDED SEPARATELY AND INCORPORATED INTO THIS SUPPLEMENT BY REFERENCE.

IDENTIFICATION NUMBER

THE IDENTIFICATION NUMBER OF THE ACCOUNT IS 6850669216.

PRINCIPAL AMOUNT

THE PRINCIPAL AMOUNT DEPOSITED IN THE ACCOUNT IS $ 2,500.00.

ISSUE AND MATURITY DATES

THE ISSUE DATE OF THE ACCOUNT IS 03/12/90 THE ACCOUNT IS BEING OPENED FOR A TERM OF SIX MONTHS WITH A MATURITY DATE OF 09/10/90.

INTEREST RATE

THE ACCOUNT EARNS SIMPLE INTEREST AT AN ANNUAL RATE OF 08.2000% THIS INTEREST RATE WILL BE FIXED FOR THE TERM OF THE ACCOUNT

EFFECTIVE ANNUAL YIELD

IF PRINCIPAL AND INTEREST WERE LEFT IN THE ACCOUNT FOR A FULL YEAR AT AN ANNUAL SIMPLE INTEREST RATE OF 08.2000% , THE ACCOUNT WOULD EARN INTEREST OF APPROXIMATELY $8.36 FOR EACH $100 ON DEPOSIT, WITH AN EFFECTIVE ANNUAL YIELD OF 8.36%. THIS EXAMPLE ASSUMES THAT FOR ACCOUNTS WITH TERMS OF LESS THAN ONE YEAR, THE ACCOUNT WAS CONTINUALLY RENEWED AT MATURITY DURING THE YEAR FOR THE SAME TERM AND AT THE SAME RATE OF INTEREST. IT IS IMPORTANT TO NOTE THAT RATES ARE SUBJECT TO CHANGE AT RENEWAL

COMPUTING DAILY INTEREST

TO COMPUTE THE DAILY INTEREST ON THE ACCOUNT, APPLY THE ANNUAL RATE OF SIMPLE INTEREST (08.2000%) TO THE PRINCIPAL IN THE ACCOUNT AT THE END OF THE DAY AND DIVIDE BY 365.

FOR EXAMPLE, AT AN ANNUAL SIMPLE RATE OF 08.2000% , THE ACCOUNT WILL EARN APPROXIMATELY $0.02 PER $100 ON DEPOSIT EACH DAY. INTEREST EARNED ON ACCOUNTS IS ACCRUED DAILY, BUT NOT ADDED TO PRINCIPAL.

FOR MORE INFORMATION ON THE ACCOUNT AND THE INFORMATION PROVIDED IN THIS SUPPLEMENT, CONSULT THE CERTIFICATE OF DEPOSIT REGULATIONS, PROVIDED SEPARATEY, OR CALL TOLL-FREE (800) 343-9209

NAME OF MEMBER BANK	TYPE OF CERTIFICATE
BOSTON SAFE DEPOSIT & TRUST CO ONE BOSTON PLACE BOSTON MA 02106	SIX MONTH MONEY MARKET CERT. NON-NEGOTIABLE • NON-TRANSFERABLE SUBSTANTIAL PENALTY FOR EARLY WITHDRAWALS

CONFIRMATION OF ADVANCE NOTIFICATION OF MATURITY DATE 07/27/90

ACCOUNT NUMBER	DATE OF ISSUE	RATE	AMOUNT	INTEREST PAID	MATURITY DATE
6850669216	03/12/90	8.2000	2,500.00		9/10/90

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

SOCIAL SECURITY NO
232-06-2218

2885

THIS DEPOSIT IS SUBJECT TO THE TERMS AND CONDITIONS PREVIOUSLY DISCLOSED TO THE DEPOSITOR IN WRITING
THIS IS A CONFIRMATION OF YOUR DEPOSIT WITH THE ABOVE BANK. ALL CERTIFICATES ARE HELD IN BOOKENTRY FORM. DIRECT INQUIRIES TO: THE BOSTON COMPANY, CD SERVICES, ONE BOSTON PLACE, BOSTON MA. 02108 (800) 343-9209

SHEARSON
LEHMAN HUTTON

An American Express company

GOVERNMENT AND AGENCIES

ACCOUNT NUMBER	S.S. OR TAX NUMBER	TYPE		BRANCH NUMBER
685-00725-I-0	233-17-4890	INITIAL INV		006

TRANSACTION DATE	TRANSACTION AMOUNT		SHARES IN THIS TRANSACTION
02/12/90	115.55		115.550

MOUNT WITHHELD (FEDERAL)	SHARES IN CERTIFICATE FORM	UNISSUED	SHARES OWNED BY YOU
$0.00	0.000		115.550

IMPORTANT: RETAIN THIS ADVICE FOR TAX PURPOSES

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

THE SHEARSON LEHMAN HUTTON FUNDS

NAME OF MEMBER BANK	TYPE OF CERTIFICATE
BOSTON SAFE DEPOSIT & TRUST CO ONE BOSTON PLACE BOSTON MA 02106	6 MONTH CERTIFICATE OF DEPOSIT NON-NEGOTIABLE * NON-TRANSFERABLE SUBSTANTIAL PENALTY FOR EARLY WITHDRAWALS

CONFIRMATION OF MATURITY DATE 9/10/90

ACCOUNT NUMBER	DATE OF ISSUE	RATE	AMOUNT	INTEREST PAID	MATURITY DATE
6850669216	03/12/90	8.2000	2,500.00	102.22	09/10/90

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 25801

SOCIAL SECURITY NO.
232-06-2218

2586

THIS DEPOSIT IS SUBJECT TO THE TERMS AND CONDITIONS PREVIOUSLY DISCLOSED TO THE DEPOSITOR IN WRITING.
THIS IS A CONFIRMATION OF YOUR DEPOSIT WITH THE ABOVE BANK. ALL CERTIFICATES ARE HELD IN BOOKENTRY FORM. DIRECT INQUIRIES TO: THE BOSTON COMPANY, CD SERVICES, ONE BOSTON PLACE, BOSTON MA. 02108 (800) 343-9209

529A

STATEMENT DATE
1/19/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799 793
1/19	1/04	INCOME REINVEST	086	240.78	7.69	31 311	2,831.104

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	240.78	CERTIFICATE SHARES	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	2,831.104
				TOTAL SHARES OWNED	2,831.104

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

Notice to Shareholders of MFS GOVERNMENT INCOME PLUS TRUST and MFS GOVERNMENT PREMIUM ACCOUNT *only*

MFS GOVERNMENT INCOME PLUS TRUST

MFS Government Income Plus Trust is paying a distribution of $0.081 per share today to shareholders of record February 5, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of)
$0.0400	Net investment income (non-capital gain income less expenses)	$0.0400	36.0%
$0.0116	Profits from sale of securities or other assets, including options	$0.0000	28.5%
$0.0000	Other distributions**	$0.0410	35.5%
$0.0294	Paid-in-Capital	$0.0000	0.0%

MFS GOVERNMENT PREMIUM ACCOUNT

MFS Government Premium account is paying a distribution of $0.0775 per share today to shareholders of record February 5, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of)
$0.0340	Net investment income (non-capital gain income less expenses)	$0.0340	63.9%
$0.0208	Profits from sale of securities or other assets, including options	$0.0351	31.9%
$0.0000	Other distributions**	$0.0084	4.2%
$0.0227	Paid-in-Capital	$0.0000	0.0%

The source of distributions is estimated at the time of declaration. From time to time the actual results of operations will be different from these estimates. This is particularly true when capital losses incurred subsequent to a distribution offset previously declared gains from sales of securities and options transactions. The "Year To Date Distributions" column provides you with the percentage of your year to date distributions (including this distribution) by distribution source and may be different from the amounts which will be reported on your 1990 Form 1099-DIV.

In January 1991, you will receive a notice reporting the Federal tax status of this and all other distributions paid during 1990, including whether any portion of the distributions represents a nontaxable return of capital.

* The source of this distibution, determined in accordance with good accounting pratice, is being disclosed as required by Section 19 of the Investment Company Act.

** Other distributions primarily are from premiums received from option contracts including those which remain open; are in excess of net investment income and profits from the sale of securities and other assets; and may be a nontaxable return of capital. A nontaxable return of capital, if any, cannot be determined until the end of the Trust's year. All or some portion of the Trust's distributions will be taxable income.

MFS GOVERNMENT INCOME PLUS TRUST
MFS GOVERNMENT PREMIUM ACCOUNT
W. Thomas London, Treasurer

February 20, 1990

STATEMENT DATE
2/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	470.10	CERTIFICATE SHARES.	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	2,862.135
				TOTAL SHARES OWNED	2,862.135

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
3/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924

NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS:	701.93	CERTIFICATE SHARES:	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT:	2,893.893
				TOTAL SHARES OWNED	2,893.893

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
4/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER BRANCH 23880-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
		DIVIDENDS	936.34	CERTIFICATE SHARES	.000
REINVEST	REINVEST	CAPITAL GAINS	.00	SHARES ON DEPOSIT	2,925.873
				TOTAL SHARES OWNED	2,925.873

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

> > > > > > PLEASE DETACH AND REMIT WITH NEXT INVESTMENT < < < < < <

STATEMENT DATE
5/18/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME. RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
		DIVIDENDS	1,173.34	CERTIFICATE SHARES.	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	2,959.442
				TOTAL SHARES OWNED:	2,959.442

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

PLEASE DETACH AND RETURN WITH NEXT INVESTMENT

STATEMENT DATE
6/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 31 ACCOUNT NUMBER 8182402578

SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.08	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921

MASSACHUSETTS INVESTORS TRUST INVESTS IN QUALITY COMMON STOCKS
FOR CURRENT INCOME AND LONG-TERM GROWTH OF CAPITAL AND INCOME.
SEE YOUR INVESTMENT ADVISER OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	1,413.05	CERTIFICATE SHARES	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	2,992.921
				TOTAL SHARES OWNED	2,992.921

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
7/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402578

SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23560-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827

MASSACHUSETTS INVESTORS TRUST INVESTS IN QUALITY COMMON STOCKS
FOR CURRENT INCOME AND LONG-TERM GROWTH OF CAPITAL AND INCOME.
SEE YOUR INVESTMENT ADVISER OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS	1,655.48	CERTIFICATE SHARES:	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT	3,026.827
				TOTAL SHARES OWNED:	3,026.827

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
8/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL III CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 31 ACCOUNT NUMBER 8182402578

SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.479	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS	1,900.65	CERTIFICATE SHARES.	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	3,061.456
				TOTAL SHARES OWNED	3,061.456

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

TRANS. DATE
1/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER: 31 ACCOUNT NUMBER 8182402578

SOCIAL SECURITY OR TAX ID NUMBER: 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799.793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831.104
2/20	2/05	INCOME REINVEST	.081	229.32	7.39	31.031	2,862.135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31.758	2,893.893
4/20	4/04	INCOME REINVEST	.081	234.41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237.00	7.06	33.569	2,959.442
6/20	6/05	INCOME REINVEST	.081	239.71	7.16	33.478	2,992.921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456
9/20	9/05	INCOME REINVEST	.081	247.98	6.83	36.307	3,097.763

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS	2,148.63	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS	.00	SHARES ON DEPOSIT:	3,097.763
				TOTAL SHARES OWNED:	3,097.763

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

> > > > > > PLEASE DETACH AND REMIT WITH NEXT INVESTMENT < < < < < <

STATEMENT DATE
9/20/90

MFS GOVERNMENT INCOME PLUS TRUST

MFS

NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 31 ACCOUNT NUMBER 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,799 793
1/19	1/04	INCOME REINVEST	.086	240.78	7.69	31.311	2,831 104
2/20	2/05	INCOME REINVEST	.081	229 32	7.39	31.031	2,862 135
3/20	3/05	INCOME REINVEST	.081	231.83	7.30	31 758	2,893 893
4/20	4/04	INCOME REINVEST	.081	234 41	7.33	31.980	2,925.873
5/18	5/03	INCOME REINVEST	.081	237 00	7.06	33 589	2,959 442
6/20	6/05	INCOME REINVEST	.081	239 71	7.16	33.479	2,992 921
7/20	7/05	INCOME REINVEST	.081	242.43	7.15	33.906	3,026.827
8/20	8/03	INCOME REINVEST	.081	245.17	7.08	34 629	3,061.456
9/20	9/06	INCOME REINVEST	.081	247.98	6.83	36.307	3,097.763
9/20	9/17	REDEMPTION THRU DLR	91604	9,902.64	6.82	1,452.000	1,645.763

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	2,148.63	CERTIFICATE SHARES	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	1,645.763
				TOTAL SHARES OWNED	1,645.763

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

PLEASE DETACH AND REMIT WITH NEXT INVESTMENT

STATEMENT DATE
10/01/90

MFS WORLDWIDE TOTAL RETURN TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER: 24 ACCOUNT NUMBER: 0000900112

SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				.000
9/28	9/20	PURCH THRU DEALER 90260	9,999.38	8.96	1,116.000	1,116.000
10/01	10/01	PHONE EXCHANGE ESTABLISHED				1,116.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	9,999.38		
		DIVIDENDS	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS.	.00	SHARES ON DEPOSIT:	1,116.000
				TOTAL SHARES OWNED:	1,116.000

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

PLEASE DETACH AND PERMIT WITH NEXT INVESTMENT

MFS FAMILY OF FUNDS

PANORAMA MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

STATEMENT DATE 10/19/1990

PANORAMA NUMBER 000163022

THE NEWEST MFS FUND, MFS WORLDWIDE TOTAL RETURN TRUST, SEEKS TOTAL RETURN BY INVESTING IN GLOBAL EQUITY AND FIXED-INCOME SECURITIES. ASK YOUR FINANCIAL ADVISER FOR DETAILS OR CALL 1-800-225-2606 FOR A FREE PROSPECTUS

MFS PORTFOLIO

FUND NAME AND ACCOUNT REGISTRATION	FUND SYMBOL	FUND/ACCOUNT NUMBER	CURRENT SHARES	CURRENT NET ASSET VALUE
PERSONAL INVESTMENTS				
MFS WORLDWIDE TOTAL RETURN TRUST NICK JOE RAHALL II CUST NICK JOE RAHALL III UNIF GIFT TO MIN ACT WV	MWT	24/ 0000900112	1,116.000	[illegible]
MFS GOVERNMENT INCOME PLUS TRUST NICK JOE RAHALLII CUST NICK JOE RAHALL III UNIF GIFT TO MIN ACT - WV	MGP	31/ 8182402578	1,685.253	6.88

YEAR TO DATE SUMMARY

FUND SYMBOL	FUND/ACCOUNT NUMBER	INVESTMENTS	REDEMPTIONS	DISTRIBUTIONS DIVIDENDS	DISTRIBUTIONS CAPITAL GAINS	DISTRIBUTIONS TOTAL DISTRIBUTIONS
PERSONAL INVESTMENTS						
MWT	24/ 0000900112	9,999.36	.00	.00	.00	.00
MGP	31/ 8182402578	.00	9,902.64	2,281.94	.00	2,281.94
TOTAL		9,999.36	9,902.64	2,281.94	.00	2,281.94

STATEMENT DATE
10/19/1990

MFS FAMILY OF FUNDS

PANORAMA MFS
Helping investors manage money since 1924

ACTIVITY SUMMARY

STATEMENT PERIOD 07/22/90 TO 10/19/90

PERSONAL INVESTMENTS

MWT 24/ 0000900112

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		BALANCE FORWARD					.000
09/28	09/20	PURCH THRU DEALER	90260	9,999.36	8.96	1,116.000	1,116.000

MGP 31/ 8182402578

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		BALANCE FORWARD					3,026.827
08/20	08/03	INCOME REINVEST	.081	245.17	7.08	34.629	3,061.456
09/20	09/06	INCOME REINVEST	.081	247.98	6.83	36.307	3,097.763
09/20	09/17	REDEMPTION THRU DLR	91604	9,902.64	6.82	1,452.000	1,645.763
10/19	10/03	INCOME REINVEST	.081	133.31	6.84	19.490	1,665.253

MFS MUTUAL FUNDS

PANORAMA MFS

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

STATEMENT DATE 11/20/1990

PANORAMA NUMBER 000163022

ACCOUNT PORTFOLIO

FUND NAME AND ACCOUNT REGISTRATION	FUND SYMBOL	FUND/ACCOUNT NUMBER	CURRENT SHARES	CURRENT NET ASSET VALUE
PERSONAL INVESTMENTS				
MFS FAMILY OF FUNDS				
MFS WORLDWIDE TOTAL RETURN TRUST NICK JOE RAHALL II CUST NICK JOE RAHALL III UNIF GIFT TO MIN ACT WV	MWT	24/ 0000900112	1,116.000	8.69
MFS GOVERNMENT INCOME PLUS TRUST NICK JOE RAHALLII CUST NICK JOE RAHALL III UNIF GIFT TO MIN ACT - WV	MGP	31/ 8182402578	1,683.406	6.96

YEAR TO DATE SUMMARY

FUND SYMBOL	FUND/ACCOUNT NUMBER	INVESTMENTS	REDEMPTIONS	DISTRIBUTIONS DIVIDENDS	DISTRIBUTIONS CAPITAL GAINS	DISTRIBUTIONS TOTAL DISTRIBUTIONS
PERSONAL INVESTMENTS						
MFS FAMILY OF FUNDS						
MWT	24/ 0000900112	9,999.36	.00	.00	.00	.00
MGP	31/ 8182402578	.00	9,902.64	2,406.83	.00	2,406.83
TOTAL		9,999.36	9,902.64	2,406.83	.00	2,406.83

STATEMENT DATE
11/20/1990

MFS MUTUAL FUNDS

PANORAMA MFS
Helping investors manage money since 1924

ACTIVITY SUMMARY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES	TOTAL SHARES OWNED
		STATEMENT PERIOD 10/20/90 TO 11/20/90					
		PERSONAL INVESTMENTS					
MFS FAMILY OF FUNDS							
		MWT 24/ 0000900112					
		BALANCE FORWARD -- NO ACTIVITY THIS PERIOD --					1,116.000
		MGP 31/ 8182402578					
		BALANCE FORWARD					1,665.253
11/20	11/05	INCOME REINVEST	.075	124.89	6.88	18.153	1,683.406

> > > > PLEASE DETACH AND USE TO MAKE CHANGES OR ADDITIONAL INVESTMENTS TO YOUR ACCOUNTS < < < <

☐ TO MAKE CHANGES
CHECK THIS BOX AND INDICATE ON THE REVERSE SIDE

MFS MUTUAL FUNDS

PANORAMA MFS
Helping investors manage money since 1924

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

PANORAMA NUMBER: 000183022

FUND SYMBOL	MINIMUM AMOUNT	FUND/ACCOUNT NUMBER	INVESTMENT AMOUNT	TAX YEAR (IRA ONLY)
MWT	$50	24/ 0000900112		****
MGP	$50	31/ 8182402578		****

TO ADD TO YOUR ACCOUNT
1. INDICATE DOLLAR AMOUNT IN APPROPRIATE BOX.
2. MAKE CHECK PAYABLE TO MFS SERVICE CENTER, INC.
P.O. BOX 2281
BOSTON, MA 02107-9906

3599

MFS

MASSACHUSETTS FINANCIAL SERVICES COMPANY
500 BOYLSTON STREET BOSTON MASSACHUSETTS 02116
617 954-5000

November 23, 1990

Dear Shareholder:

At MFS, we are committed to exploring and evaluating methods for improving the services we provide to our customers. We are therefore pleased to announce an addition to your Panorama consolidated account statement. If you have accounts in both the MFS Family of Funds and the MFS Lifetime Investment Program, you will now receive one statement combining all your MFS holdings. If you own only one fund, or if all the funds you own are in one of the two fund groups, your Panorama statement will not change.

Please remember that although holdings in both fund groups are shown on a single statement, they remain separate groups for exchange purposes. Exchanges may only be made among funds in the same group; you may not exchange shares of a Lifetime fund into the MFS Family of Funds and vice versa.

We hope your consolidated statement will make it easier and more convenient to monitor your MFS portfolio. If you have any questions about your Panorama statement, please call our Mutual Fund Service Department at 1-800-225-2606 any business day between 8 a.m. and 6 p.m. Eastern time. As always, we appreciate your continued confidence in MFS.

Sincerely,

Richard B. Bailey

Richard B. Bailey
Chairman

45-573 3599

Helping investors manage money since 1924

Notice to Shareholders of MFS GOVERNMENT INCOME PLUS TRUST and MFS GOVERNMENT PREMIUM ACCOUNT *only*

MFS GOVERNMENT INCOME PLUS TRUST

MFS Government Income Plus Trust is paying a distribution of $0.075 per share today to shareholders of record November 5, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of
$0.0410	Net investment income (non-capital gain income less expense)	$0.0410	49.9%
$0.0000	Profits from sale of securities or other assets, including options	$0.0000	0.0%
$0.0000	Other distributions**	$0.0340	50.1%
$0.0340	Paid-in-Capital	$0.0000	0.0%

MFS GOVERNMENT PREMIUM ACCOUNT

MFS Government Premium Account is paying a distribution of $0.075 per share today to shareholders of record November 5, 1990.

SEC Accounting Disclosure* This Distribution (Per Share)		Federal Income Tax Information This Distribution (Per Share)	Year to Date Distributions (Percentage of)
$0.0480	Net investment income (non-capital gain income less expense)	$0.0480	61.6%
$0.0000	Profits from sale of securities or other assets, including options	$0.0000	0.0%
$0.0000	Other distributions**	$0.0270	38.4%
$0.0270	Paid-in-Capital	$0.0000	0.0%

The source of distributions is estimated at the time of declaration. From time to time the actual results of operations will be different from these estimates. This is particularly true when capital losses incurred subsequent to a distribution offset previously declared gains from sales of securities and options transactions. The "Year To Date Distributions" column provides you with the percentage of your year to date distributions (including this distribution) by distribution source and may be different from the amounts which will be reported on your 1990 Form 1099-DIV.

In January 1991, you will receive a notice reporting the Federal tax status of this and all other distributions paid during 1990, including whether any portion of the distributions represents a non-taxable return of capital.

* The source of this distribution, determined in accordance with good accounting practice, is being disclosed as required by Section 19 of the Investment Company Act.

** Other distributions primarily are from premiums received from option contracts including those which remain open; are in excess of net investment income and profits from the sale of securities and other assets; and may be a non-taxable return of capital. A non-taxable return of capital, if any, cannot be determined until the end of the Trust's year. All or some portion of the Trust's distributions will be taxable income.

November 20, 1990

MFS GOVERNMENT INCOME PLUS TRUST
MFS GOVERNMENT PREMIUM ACCOUNT
W. Thomas London, Treasurer

(over)

American Capital
A Family of Funds

P.O. Box 319
Kansas City, MO 64141

233-17-4890 2/28/90

50	670710511	8

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

RAHALL/WHEAT BK08

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
BECKLEY WV
110 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

		BEGINNING BALANCE				1,934.464
2/[illegible]	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/[illegible]	[illegible]	INCOME REINVEST	146.11	10.800	13.529	1,961.430

AN AMERICAN CAPITAL MUTUAL FUND MAKES AN EXCELLENT INVESTMENT VEHICLE FOR AN INDIVIDUAL RETIREMENT ACCOUNT. IF YOU HAVEN'T ALREADY TAKEN ADVANTAGE OF THIS OPPORTUNITY, CONTACT YOUR BROKER OR CALL THE IRA HOTLINE AT 1-800-421-0991.

ACCOUNT SUMMARY

24 HOURS A DAY ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID NO	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	291.090
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
+ NON CERTIFICATE FORM =	1,961.430
TOTAL SHARES OWNED	1,961.430

American Capital
A Family of Funds

P.O. Box 319
Kansas City, MO 64141

TAX IDENTIFICATION NO OR SOCIAL SECURITY NO 233-17-4890

3/30/90

FUND	ACCOUNT NO	CHECK DIGIT
50	670710511	8

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT BK08

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

INVESTOR

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER

WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096

AN AMERICAN CAPITAL MUTUAL FUND MAKES AN EXCELLENT INVESTMENT VEHICLE FOR AN INDIVIDUAL RETIREMENT ACCOUNT. IF YOU HAVEN'T ALREADY TAKEN ADVANTAGE OF THIS OPPORTUNITY, CONTACT YOUR BROKER OR CALL THE IRA HOTLINE AT 1-800-421-0991.

ACCOUNT SUMMARY

24 HOURS A DAY ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID. NO.	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	438.270
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM +	
NON CERTIFICATE FORM =	1,975.096
TOTAL SHARES OWNED	1,975.096

American Capital
Family of Funds

P.O. Box 319
Kansas City, MO 64141

TAX IDENTIFICATION NO OR SOCIAL SECURITY NO 233-17-4890 4/30/90

FUND NO	ACCOUNT NO	CHECK DIGIT
50	670710511	A

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT BK08

INVESTOR

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER

WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/26	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	138.20	10.670	12.952	1,988.048

AMERICAN CAPITAL OFFERS A MUTUAL FUND FOR EVERY INVESTMENT OBJECTIVE. CALL YOUR INVESTMENT REPRESENTATIVE OR AMERICAN CAPITAL AT 1-800-421-5666 FOR MORE DETAILED INFORMATION ON THE AMERICAN CAPITAL FAMILY OF FUNDS.

ACCOUNT SUMMARY

24 HOURS A DAY ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID NO	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	576.470
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
+ NON CERTIFICATE FORM	1,988.048
= TOTAL SHARES OWNED	1,988.048

American Capital
Family of Funds

P.O. Box 319
Kansas City, MO 64141

TAX IDENTIFICATION NO 233-17-4890
OR SOCIAL SECURITY NO

5/31/90

FUND NO.	ACCOUNT NO.	CHECK DIGIT
50	670710511	8

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT 8K08

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

INVESTOR

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER

WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	138.20	10.670	12.952	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002

AMERICAN CAPITAL OFFERS A MUTUAL FUND FOR EVERY INVESTMENT OBJECTIVE. CALL YOUR INVESTMENT REPRESENTATIVE OR AMERICAN CAPITAL AT 1-800-421-5666 FOR MORE DETAILED INFORMATION ON THE AMERICAN CAPITAL FAMILY OF FUNDS.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424
GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID. NO.	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	715.730
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
+	
NON CERTIFICATE FORM	2,001.002
=	
TOTAL SHARES OWNED	2,001.002

American Capital
Family of Funds

PO Box 319
Kansas City MO 64141

TAX IDENTIFICATION NO 233-17-4890 6/29/90.

FUND NO	ACCOUNT NO	CHECK DIGIT
50	670710511	8

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

REPRESENTATIVE NAME NUMBER
RAHALL/WHEAT BK08

INVESTOR
NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER
WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.090
4/30	4/30	INCOME REINVEST	138.20	10.670	12.958	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	2,014.008

AMERICAN CAPITAL OFFERS A MUTUAL FUND FOR EVERY INVESTMENT OBJECTIVE. CALL YOUR INVESTMENT REPRESENTATIVE OR AMERICAN CAPITAL AT 1-800-421-5666 FOR MORE DETAILED INFORMATION ON THE AMERICAN CAPITAL FAMILY OF FUNDS.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS	
INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID NO	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	855.800
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
NON CERTIFICATE FORM	2,014.008
TOTAL SHARES OWNED	2,014.008

3605

American Capital
Family of Funds

P.O. Box 319
Kansas City, MO 64141

TAX IDENTIFICATION NO. 233-17-4890
OR SOCIAL SECURITY NO

7/31/90

FUND NO.	ACCOUNT NO	CHECK DIGIT
50	670710511	8

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT BK08

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

INVESTOR

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER

WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	BAO DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	138.20	10.670	12.952	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	2,014.008
7/31	7/31	INCOME REINVEST	140.91	10.810	13.035	2,027.043

AMERICAN CAPITAL OFFERS A MUTUAL FUND FOR EVERY INVESTMENT OBJECTIVE. CALL YOUR INVESTMENT REPRESENTATIVE OR AMERICAN CAPITAL AT 1-800-421-5666 FOR MORE DETAILED INFORMATION ON THE AMERICAN CAPITAL FAMILY OF FUNDS.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID. NO.	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	996.710
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
+	
NON CERTIFICATE FORM	2,027.043
=	
TOTAL SHARES OWNED	2,027.043

American Capital
Family of Funds

P.O. Box 319
Kansas City, MO 64141

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

TAX IDENTIFICATION OR SOCIAL SECURITY NO: 233-17-4690

8/31/1990

FUND NO	ACCOUNT NO	CHECK DIGIT
50	6707110511	8

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT
BK08

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRANSACTION DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.96	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	139.20	10.670	12.951	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	2,014.008
7/31	7/31	INCOME REINVEST	140.91	10.810	13.035	2,027.043
8/31	8/31	INCOME REINVEST	141.91	10.630	13.350	2,040.393

NEW: AMERICAN CAPITAL GOVERNMENT TARGET SERIES, A 7-YEAR FUND. CONTACT YOUR BROKER OR CALL 1-800-421-5666 FOR A PROSPECTUS CONTAINING MORE COMPLETE INFORMATION INCLUDING ALL CHARGES & EXPENSES. READ IT CAREFULLY BEFORE YOU INVEST OR SEND MONEY.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424

GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS	
INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID NO	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	1,138.62
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
NON CERTIFICATE FORM	2,040.393
TOTAL SHARES OWNED	2,040.393

3607

American Capital
Family of Funds

P.O. Box 419319
Kansas City, MO 64173-0282

TAX IDENTIFICATION NO OR SOCIAL SECURITY NO 233-17-4890 9/28/1990

FUND NO	ACCOUNT NO	CHECK DIGIT
50	670710511	8

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT
BK08
WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	138.20	10.670	12.952	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	2,014.008
7/31	7/31	INCOME REINVEST	140.91	10.810	13.035	2,027.043
8/31	8/31	INCOME REINVEST	141.91	10.630	13.350	2,040.393
9/28	9/28	INCOME REINVEST	142.88	10.600	13.479	2,053.872

NEW: AMERICAN CAPITAL GOVERNMENT TARGET SERIES, A 7-YEAR FUND. CONTACT YOUR BROKER OR CALL 1-800-421-5666 FOR A PROSPECTUS CONTAINING MORE COMPLETE INFORMATION INCLUDING ALL CHARGES & EXPENSES. READ IT CAREFULLY BEFORE YOU INVEST OR SEND MONEY.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424
GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID NO	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	1,281.50
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
NON CERTIFICATE FORM	2,053.872
TOTAL SHARES OWNED	2,053.872

3608

American Capital
Family of Funds

P.O. Box 419319
Kansas City, MO 64173-0282

233-17 4890 10/31/1990

50	67071051	8

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

REPRESENTATIVE NAME NUMBER
RAHALL WHEAT
8808
WHEAT FIRST SECURITIES INC
BECKLEY WV
125 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

POSTING DATE	TRADE DATE	TRANSACTION DESCRIPTION	PAYMENTS	PRICE	SHARES	BALANCE
		BEGINNING BALANCE				1,334.464
1/31	1/31	INCOME REINVEST	144.38	10.790	13.437	1,347.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,361.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,375.096
4/30	4/30	INCOME REINVEST	138.29	10.570	13.082	1,388.048
5/31	5/31	INCOME REINVEST	139.26	10.710	13.004	1,401.052
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	1,414.058
7/31	7/31	INCOME REINVEST	140.91	10.810	13.035	1,427.093
8/31	8/31	INCOME REINVEST	141.91	10.630	13.350	1,440.443
9/28	9/28	INCOME REINVEST	142.88	10.661	13.403	1,453.846
10/31	10/31	INCOME REINVEST	143.75	10.610	13.545	1,467.421

NEW: AMERICAN CAPITAL GOVERNMENT TARGET SERIES, A 7-YEAR FUND. CONTACT YOUR BROKER OR CALL 1-800-421-5666 FOR A PROSPECTUS CONTAINING MORE COMPLETE INFORMATION INCLUDING ALL CHARGES & EXPENSES. READ IT CAREFULLY BEFORE YOU INVEST OR SEND MONEY.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424
GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS	
INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND ACCT NO	76-3025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	1,425.26
LONG TERM CAPITAL GAINS DISTRIBUTION	

[illegible]	
[illegible]	2,067.421
[illegible]	2,067.421

3609

American Capital
Family of Funds

P.O. Box 419319
Kansas City, MO 64173-0282

TAX IDENTIFICATION NO OR SOCIAL SECURITY NO 233-17-4890 11/30/1990

FUND NO.	ACCOUNT NO	CHECK DIGIT
50	670710511	8

AMERICAN CAPITAL HIGH YIELD TAX EXEMPT

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4611

REPRESENTATIVE NAME/NUMBER
RAHALL/WHEAT
BK08
WHEAT FIRST SECURITIES INC
BECKLEY WV
122 MAIN STREET PO BOX 1328
BECKLEY WV 25801-4611

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT OF TRANSACTION	SHARE PRICE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BEGINNING BALANCE				1,934.464
1/31	1/31	INCOME REINVEST	144.98	10.790	13.437	1,947.901
2/28	2/28	INCOME REINVEST	146.11	10.800	13.529	1,961.430
3/30	3/30	INCOME REINVEST	147.18	10.770	13.666	1,975.096
4/30	4/30	INCOME REINVEST	138.20	10.670	12.952	1,988.048
5/31	5/31	INCOME REINVEST	139.26	10.750	12.954	2,001.002
6/29	6/29	INCOME REINVEST	140.07	10.770	13.006	2,014.008
7/31	7/31	INCOME REINVEST	140.91	10.810	13.035	2,027.043
8/31	8/31	INCOME REINVEST	141.91	10.630	13.350	2,040.393
9/28	9/28	INCOME REINVEST	142.88	10.600	13.479	2,053.872
10/31	10/31	INCOME REINVEST	143.75	10.610	13.549	2,067.421
11/30	11/30	INCOME REINVEST	144.69	10.720	13.497	2,080.918

IN UNSETTLED ECONOMIC TIMES, SYSTEMATIC INVESTING IN EQUITY FUNDS CAN MAKE GOOD SENSE. CONTACT YOUR INVESTMENT REPRESENTATIVE OR AMERICAN CAPITAL AT 1-800-421-5666.

ACCOUNT SUMMARY

24 HOURS A DAY
ACCOUNT INFORMATION
1-800-847-2424
GENERAL INFORMATION
800-421-5666

YOUR DISTRIBUTION OPTION IS: INCOME DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

FUND TAX ID. NO.	76-6025478
TOTAL DIVIDENDS AND OTHER DISTRIBUTIONS	1,569.94
LONG TERM CAPITAL GAINS DISTRIBUTION	

SHARES YOU NOW OWN	
IN CERTIFICATE FORM	
+	
NON CERTIFICATE FORM	2,080.918
=	
TOTAL SHARES OWNED	2,080.918

3610

STATEMENT DATE
12/19/90

MFS WORLDWIDE TOTAL RETURN TRUST

MFS

NICK JOE RAHALL II CUST FBO
SUZANNE NICOLE RAHALL
UNIF GIFTS TO MINORS ACT-WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25801-4611

FUND NUMBER 24 ACCOUNT NUMBER 0000900288

SOCIAL SECURITY OR TAX ID NUMBER 233-25-9977

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					.000
12/13	12/05	PURCH THRU DEALER	90713	5,006.82	9.17	546 000	546 000
12/19	12/19	PHONE EXCHANGE ESTABLISHED					546.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTIONS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	5 006 82		
REINVEST	REINVEST	DIVIDENDS	00	CERTIFICATE SHARES	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT	546 000
				TOTAL SHARES OWNED	546 000

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

MFS

MFS SERVICE CENTER, INC.

P.O. BOX 2281
BOSTON, MA 02107-9906
1-800-225-2606

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4698

DECEMBER 13, 1990

Dear Shareholder(s):

Thank you for investing with MFS.

We have established your account in MFS WORLDWIDE TOTAL RETURN TRUST. Below you will find the details of your initial investment as well as a summary of any special services you have elected. Please take a few minutes to review the information to make certain it is correct. If any changes are necessary, please indicate them in the appropriate section and return the statement to us in the enclosed self-addressed envelope or call our Mutual Fund Service Department at 1-800-225-2606.

Thank you for your confidence in MFS and we look forward to being of service to you.

MFS Service Center, Inc.

ACCOUNT NUMBER 24-00000900288-9

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
12/13	12/05	PURCH THRU DEALER	90713	5,006.82	9.17	546.000	546.000

CORRECTIONS

Soc. Sec./Tax ID Number: 233-25-9977
Dividend OPTION: REINVEST
Capital Gain OPTION: REINVEST

Representative Number: BK08
Representative Name: RAHALL

SHEARSON
MAN HUTTON

An American Express company

Client Statemen

#7

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801

HAYDEN COMMODITIES CORP
THROUGH THE COURTESY OF
SHEARSON LEHMAN HUTTON INC
WORLD FINANCIAL CENTER
AMERICAN EXPRESS TOWER/7TH FL

COUNT NO: 685-03367

SHEARSON LEHMAN FUTURES 1000

MENT DATE	TOTAL UNITS OWNED	NET ASSET VALUE	TOTAL VALUE
-31-90	10.0000	1,503.4800	15,034.8000

SEC NO.	BRANCH	FINANCIAL CONSULTANT	DISTRIBUTION PAID
-78-8645	STROUDSBURG PA	JAMES A JOSEPH	1,000.00

DATE	TRANSACTION DESCRIPTION	DOLLAR AMOUNT	PRICE	UNITS THIS TRANSACTION
-27-85	PLAN ACCOUNT OPENED			
-27-85	DEPOSIT SHARES BOUGHT	10,000.00	1,000.0000	10.0000
-14-86	ESCROW INTEREST EARNED	268.75		
-30-89	CASH DISBURSEMENT @ 100.0000	1,000.00		

SHEARSON LEHMAN HUTTON

Preferred Client IRA Statement

January 1 - January 28, 1990

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

#8

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Cash balance	$ 69.20
Money funds	938.37
Mutual funds	3,119.13
Unit Investment trusts	2,383.64
Direct Investments/insurance	(see Portfolio details)
Net value this period	**$ 6,510.34**
Net value last period	**$ 6,806.95**

Earnings summary

	This period	This year
Money funds earnings	$ 2.81	$ 2.81
Total	**$ 2.81**	**$ 2.81**

	This period	This year
Other income	$ 69.20	$ 69.20

3614

Account number 685-60527-14 240

Combined cash and money funds balance

Combined opening cash and money funds balance			$ 935.56
	Amounts added	Amounts subtracted	
Money funds earnings reinvested	2.81		
Other income credited	[illegible]		
Total	$ 72.01	$ [illegible]	
Combined closing cash and money funds balance			$ [illegible] 57

Cash	69.20
Money funds	938.37

RA activity summary

nounts added your IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed [illegible] responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The [illegible] shown below are based on information you provided to your Financial Consultant.

Contributions

Description				
Contributions for the current tax year	$ [illegible]	$ [illegible]	$ [illegible]	$ [illegible]

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on [illegible]

loney funds

Description	No. of shares	Market value	[illegible]	[illegible]
SLH DAILY DIVIDEND FUND	938.37	$ [illegible]	[illegible]	[illegible] $ [illegible]
Total value of money funds		$ 938.37		

lutual unds

Description	Number of shares	Price	[illegible]	[illegible]
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ [illegible]	$ [illegible]	
Total value of mutual funds			$ 3,118.13	

3615

Account number 685-60527-14 240

ilt vestment ists

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT	2 500	$ .93[illegible]	1.[illegible]52%	$ [illegible]	$ 2,383.64	
Total value of unit investment trusts				$ 41.78	$ 2,383.64	

rect vestments/ surance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

:arnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account*

oney nds ırnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/12/90	SLH DAILY DIVIDEND FUND	$ 2.81		Reinvested	$ 2.81
Total earnings from money funds		**$ 2.81**	$ 0.00		**$ 2.81**

ther come

Date	Description	Comment	Amount
01/26/90	BALCOR EQUITY PEN INV III DISTRIBUTION 13251846681068		$ 26.64
01/26/90	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846635591		42.56
Total other income			**$ 69.20**

SHEARSON LEHMAN HUTTON

Preferred Client IRA Statement

January 29 - February 25, 1990

SS # 236-78-8645
Your Financial Consultant
JAMES A. [illegible]
SHEARSON LEHMAN HUTTON INC
[illegible] MAIN STREET
SUITE [illegible]
[illegible], PA 18[illegible]
717 421 31[illegible]
Preferred client service center 1 800 [illegible]

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:
TERRY SHEPHERD
NICK RAHALL

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds		$ 1,105.60
Mutual funds		3,[illegible]3.47
Unit investment trusts		2,377.93
Direct investments/insurance		(see Portfolio detail)
Net value this period		$ 6,557.00
Net value last period	$ 6,510.34	

Earnings summary

	This period	This year
Money funds earnings	$ 5.87	$ [illegible]
Total	$ 5.87	$ 8.68

	This period	This year
Other income	$ [illegible]	$ [illegible]

Combined cash and money funds balance

Combined opening cash and money funds balance			$ 1,007.57
	Amounts added	Amounts subtracted	
Money funds earnings reinvested	5.87		
Other income credited	92.16		
Total	$ 98.03	$ 0.00	
Combined closing cash and money funds balance			$ 1,105.60

Money funds	1,105.60

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SHEARSON LEHMAN HUTTON

Preferred Client IRA Statement
January 29 - February 25, 1990

Account number 685-60527-14 240

IRA activity summary

nounts ded to ur IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/23/90.

oney funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	1,105.60	$ 1,105.60	7.737%	Accrued dividends of $ 3.24
Total value of money funds		**$ 1,105.60**		

utual nds

Description	Number of shares	Price	Market value	Comment
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ 10.77	$ 3,073.47	
Total value of mutual funds			**$ 3,073.47**	

nit vestment usts

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT	2,560	$ .928	1.756%	$ 41.78	$ 2,377.93	
Total value of unit investment trusts				$ 41.78	$ 2,377.93	

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Account number 685-60527-14 240

rect vestments/ surance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

oney nds rnings

Date	Description	Taxable	Non-taxable	Comment	Amount
02/09/90	SLH DAILY DIVIDEND FUND	$ 5.87		Reinvested	$ 5.87
Total earnings from money funds		**$ 5.87**	**$ 0.00**		**$ 5.87**

ther come

Date	Description	Comment	Amount
02/02/90	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846635591		$ 92.16
Total other income			**$ 92.16**

Money funds details

All transactions are traded at $1.00 per share.

oney funds tivity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 938.37
01/29/90	Autoinvest	SLH DAILY DIVIDEND FUND	69.20	[illegible]
02/05/90	Autoinvest	SLH DAILY DIVIDEND FUND	92.16	92.16
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	5.87	5.87
	Closing money funds balance			$ 1,105.60

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LEHMAN HUTTON

Preferred Client IRA Statement

February 26 - March 31, 1990

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC.
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 24.18
Mutual funds	6,341.00
Unit Investment trusts	2,482.69
Direct Investments/Insurance	*(see Portfolio details)*
Net value this period	**$ 8,847.87**
Net value last period	**$ 6,557.00**

Earnings summary

	This period	This year
Dividends	$ 47.23	$ 47.23
Money funds earnings	7.80	16.48
Total	$ 55.03	$ 63.71

Additional summary information

	This period	This year
Other income	$ 0.00	$ 161.36

IMPORTANT NOTICE: Your annual custodial fee in the amount of $30.00 is now due. See the enclosed News Letter for further details.

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Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 1,105 60
Securities bought and other subtractions		3,105 00	
Automatic reinvestments		36 45	
Securities sold and other additions	0 00		
Deposits	2,000 00		
Dividends credited	47 23		
Money funds earnings reinvested	7 80		
Total	$ 2,055 03	$ 3,136 45	
Combined closing cash and money funds balance			$ 24 18

Money funds	24.18

IRA activity summary

nounts
lded to
ur IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed to your IRA during the calendar year It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax The designations shown below are based on information you provided to your Financial Consultant

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0 00	$ 0 00	$ 2,000 00	$ 2,000 00
Contributions for the current tax year	0 00	0 00	0 00	0 00

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 03/30/90

oney funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	24 18	$ 24 18	7 703%	Accrued dividends of $ 6 68
Total value of money funds		$ 24.18		

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LEHMAN HUTTON

Preferred Client IRA Statement
February 26 - March 31, 1990

NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual Funds

Description	Number of shares	Price	Market value	Comment
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ 11.26	$ 3,213.30	
SLH PORTFOLIO HIGH INCOME	295.068	10.60	3,127.70	
Total value of mutual funds			**$ 6,341.00**	

Unit Investment Trusts

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT	2,560	$ .969	1.682%	$ 41.78	$ 2,482.69	
Total value of unit investment trusts				**$ 41.78**	**$ 2,482.69**	

Direct Investments/Insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

3622

Transaction details

vestment tivity

Date	Activity	Description	Quantity	Price	Amount
03/21/90	Investment	SLH PORTFOLIO HIGH INCOME T/D 03/14/90	291.627	$ 10.63	$ -3,100.00
Total securities bought and other subtractions					$ -3,100.00
Total securities sold and other additions					$ 0.00

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Hutton on your behalf. It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
03/30/90	SLH PORTFOLIO HIGH INCOME	3.439	$ 10.60	$ -36.45
Total automatic reinvestments				$ -36.45

posits

Date	Description	Amount
03/07/90	PR YR CONTR UNSPECIFIED FROM 685-03367 TO 685-60527	$ 2,000.00

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

vidends

Date	Description	Taxable	Non-taxable	Comment	Amount
03/01/90	UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT CASH DIV ON 2560 SHS RECORD 02/15/90 PAY 03/01/90	$ 10.78			$ 10.78
03/30/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 03/23/90 PAY 03/30/90	36.45			36.45
Total dividends earned		$ 47.23	$ 0.00		$ 47.23

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SHEARSON LEHMAN HUTTON

Account number 685-60527-14 240

ney
ds
rnings

Date	Description	Taxable	Non-taxable	Comment	Amount
03/09/90	SLH DAILY DIVIDEND FUND	$ 7.80		Reinvested	$ 7.80
Total earnings from money funds		**$ 7.80**	**$ 0.00**		**$ 7.80**

Money funds details

All transactions are traded at $1.00 per share.

ney funds
tivity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 1,105.00
03/02/90	Autoinvest	SLH DAILY DIVIDEND FUND	10.78	10.78
03/08/90	Autoinvest	SLH DAILY DIVIDEND FUND	2,000.00	2,000.00
03/08/90	Investment	SLH DAILY DIVIDEND FUND	2,000.00	2,000.00
03/08/90	Redemption	SLH DAILY DIVIDEND FUND	2,000.00	-2,000.00
03/21/90	Redemption	SLH DAILY DIVIDEND FUND	3,100.00	-3,100.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	7.80	7.80
	Closing money funds balance			$ 24.18

SHEARSON LEHMAN HUTTON

Preferred Client IRA Statement

April [illegible]

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
70[illegible] MAIN STREET
S[illegible]18 [illegible]
STROUDSBURG PA 18360
717-421-3100

Preferred client service center 1 800-232-4454

Account number 685-60527-14 240
A[illegible] requested [illegible] statement have also been sent to

TERRY SHEPHERD
N JOE RAHALL

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds		$ 31.93
Mutual funds		6,[illegible]04
Unit investment trusts		2,44[illegible]
Direct investments/insurance		(see Portfolio details)
Net value this period		$ 9,005.18
Net value last period	$ 8,847.87	

Earnings summary

	This period	This year
Dividends	$ 4[illegible]	$ [illegible]
Money funds earnings	[illegible]	[illegible]
Total	$ 42.33	$ 111.04

Additional summary information

	This period	This year
Other income	$ [illegible]	$ [illegible]

Combined cash and money funds balance

Combined opening cash and money funds balance			$ 24.18
	Amounts added	Amounts subtracted	
Securities bought and other subtractions		[illegible]	
Automatic reinvestments		4[illegible].54	
Securities sold and other additions	[illegible]		
Dividends credited	4[illegible].54		
Money funds earnings reinvested	[illegible]		
Other income credited	[illegible]		
Total	$ 354.[illegible]	$ [illegible]	
Combined closing cash and money funds balance			$ 31.93

Money funds	31.93

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Account number 685-60527-14 240

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0.00	$ 0.00	$ 2,000.00	$ 2,000.00
Contributions for the current tax year	0.00	0.00	0.00	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/27/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	31.93	$ 31.93	7.729%	Accrued dividends of $ 0.55
Total value of money funds		**$ 31.93**		

Mutual funds

Description	Number of shares	Price	Market value	Comment
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ 10.91	$ 3,113.42	
SLH HIGH YIELD FUND	21.825	13.26	289.4	
SLH PORTFOLIO HIGH INCOME	298.588	10.47	3,126.22	
Total value of mutual funds			**$ 6,529.04**	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT	2,500	$ .954	1.709%	$ 41.78	$ 2,444.21	
Total value of unit investment trusts				**$ 41.78**	**$ 2,444.21**	

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Account number 685-60527-14 240

Direct Investments/ Insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date [illegible]
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date [illegible]
Total direct investments/insurance	**$ 6,000.00**	

Transaction details

Investment Activity

Date	Activity	Description	Quantity	Price	Amount
04/24/90	Investment	SLH HIGH YIELD FUND T/D 04/17/90	21.549	$ 14.20	$ 306.00
Total securities bought and other subtractions					$ 306.00
Total securities sold and other additions					$ 0.00

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Hutton on your behalf. It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
04/27/90	SLH HIGH YIELD FUND	270	$ [illegible]	$ [illegible]
04/27/90	SLH PORTFOLIO HIGH INCOME	3.522	[illegible]	[illegible]
Total automatic reinvestments				$ 40.54

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SHEARSON LEHMAN HUTTON

Preferred Client IRA Statement

Account number 685-60527-14 240

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
04/27/90	SLH HIGH YIELD FUND CASH DIV RECORD 04/20/90 PAY 04/27/90	$ 3.66			$ 3 66
04/27/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 04/20/90 PAY 04/27/90	36.88			36.88
Total dividends earned		**$ 40.54**	**$ 0.00**		**$ 40.54**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
04/12/90	SLH DAILY DIVIDEND FUND	$ 6 79		Reinvested	$ 6 79
Total earnings from money funds		**$ 6.79**	**$ 0.00**		**$ 6.79**

Other income

Date	Description	Comment	Amount
04/16/90	BALCOR EQUITY PEN INV III DISTRIBUTION 13251846681068		$ 26 64
04/16/90	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846635591		280 32
Total other income			**$ 306 96**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 24 18**
04/17/90	Investment	SLH DAILY DIVIDEND FUND	306 90	306 90
04/17/90	Autoinvest	SLH DAILY DIVIDEND FUND	306 96	306 96
04/17/90	Redemption	SLH DAILY DIVIDEND FUND	306.90	-306.90

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SHEARSON LEHMAN HUTTON

Account number 685-60527-14 240

loney funds
ctivity
ntinued

Date	Activity	Description	Quantity	Amount
04/24/90	Redemption	SLH DAILY DIVIDEND FUND	306.00	$ -306.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	6.79	6.79
	Closing money funds balance			$ 31.83

SHEARSON LEHMAN HUTTON

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421 3100

Preferred client service center: 1-800-232-4454

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds		$ 13 63
Mutual funds		6,930 75
Unit investment trusts		2,711 07
Direct investments/insurance		*(see Portfolio details)*
Net value this period		**$ 9,655 45**
Net value last period	**$ 9,005.18**	

Earnings summary

	This period	This year
Dividends	$ 93 34	$ 181 11
Money funds earnings	92	24 19
Total	**$ 94 26**	**$ 205 30**

Additional summary information

	This period	This year
Other income	$ 0 00	$ 468 32

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 31 93**
Automatic reinvestments		-82 56	
Withdrawals		-30 00	
Dividends credited	93 34		
Money funds earnings reinvested	92		
Total	$ 94 26	$ -112 56	
Combined closing cash and money funds balance			**$ 13.63**

Money funds	13 63

3630

SHEARSON LEHMAN HUTTON

Account number 685 60527 14 240

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Rollovers	Total
Contributions for the prior tax year made in the current year	$ [illegible]	$ [illegible]	$ [illegible]	$ [illegible]
Contributions for the current tax year	0.00	[illegible]	[illegible]	[illegible]

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/20/[illegible]

Money funds

Description	No. of shares	Market value	Accrued income	Comment
SLH DAILY DIVIDEND FUND	13.63	$ [illegible]	[illegible]	[illegible]
Total value of money funds		$ 13.63		

Mutual funds

Description	Number of shares	Price	Market value	Comment
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ 11.89	$ [illegible]	
SLH HIGH YIELD FUND	22.387	13.40	[illegible]	
SLH PORTFOLIO HIGH INCOME	305.73	10.59	[illegible]	
Total value of mutual funds			$ 8,930.75	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT	2,560	$ 1.059	1.541%	$ 41.78	$ 2,711.07	
Total value of unit investment trusts				$ 41.78	$ 2,711.07	

3631

SHEARSON LEHMAN HUTTON

Account number 685-60527-14 240

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise Face amounts do not necessarily reflect current market value

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Hutton on your behalf It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
05/25/90	SLH HIGH YIELD FUND	281	$ 13.22	$ 3.71
05/25/90	SLH PORTFOLIO HIGH INCOME	3.575	10.43	37.42
06/29/90	SLH HIGH YIELD FUND	281	13.40	3.76
06/29/90	SLH PORTFOLIO HIGH INCOME	3.567	10.59	-37.77
Total automatic reinvestments				**$ -82.56**

Withdrawals

Date	Description	Reference no	Amount
06/08/90	1990 CUSTODIAL FEE		$ 30.00

3632

SHEARSON LEHMAN HUTTON

Account number 685-60527-14 240

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and non-taxable designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	[illegible]	Amount
05/25/90	SLH HIGH YIELD FUND CASH DIV RECORD 05/18/90 PAY 05/25/90	$ 3.71			$ 3.71
05/25/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 05/18/90 PAY 05/25/90	37.32			37.32
06/01/90	UTS UNCOMMON VALUES UT # 89 Q SER FR UNDIV INT CASH DIV ON 2560 SHS RECORD 05/15/90 PAY 06/01/90	10.78			10.78
06/29/90	SLH HIGH YIELD FUND CASH DIV RECORD 06/22/90 PAY 06/29/90	3.76			3.76
06/29/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 06/22/90 PAY 06/29/90	37.77			37.77
Total dividends earned		**$ 93.34**	**$ 0.00**		**$ 93.34**

Money funds earnings

Date	Description	Taxable	Non-taxable	[illegible]	Amount
05/11/90	SLH DAILY DIVIDEND FUND	$ .67		[illegible]	$ .67
06/08/90	SLH DAILY DIVIDEND FUND	.25		[illegible]	.25
Total earnings from money funds		**$ .92**	**$ 0.00**		**$ .92**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 31.93
06/04/90	Autoinvest	SLH DAILY DIVIDEND FUND	10.78	10.78

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SHEARSON LEHMAN HUTTON

An American Express Company

Account number 685-60527-14 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
06/08/90	Redemption	SLH DAILY DIVIDEND FUND	30.00	$ -30.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	.92	.92
	Closing money funds balance			**$ 13.63**

LEHMAN HUTTON

July 1 - July 31,

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN HUTTON INC
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center 1-800-232-4454

Account number 685-60527-14 240
As you requested copies of this statement have also been sent to

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds		$ 77.16
Mutual funds		6,919.28
Unit investment trusts		2,747.23
Direct investments/insurance		(see Portfolio details)
Net value this period		**$ 9,743.67**
Net value last period	$ 9,655.45	

Earnings summary

	This period	This year
Dividends	$ 38.59	$ [illegible]
Money funds earnings	.06	24.25
Total	**$ 38.65**	**$ 243.95**

Additional summary information

	This period	This year
Other income	$ [illegible]	$ [illegible]

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 13.63
Securities bought and other subtractions		2,734.95	
Automatic reinvestments		-38.59	
Securities sold and other additions	2,735.62		
Dividends credited	38.59		
Money funds earnings reinvested	.06		
Other income credited	62.80		
Total	$ 2,837.07	$ 2,773.54	
Combined closing cash and money funds balance			$ 77.16

Money funds	77.16

3635

Account number 685-60527-14 240

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Hutton to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0.00	$ 0.00	$ 2,000.00	$ 2,000.00
Contributions for the current tax year	0.00	0.00	0.00	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/27/90.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	77.16	$ 77.16	7.658%	Accrued dividends of $ 0.20
Total value of money funds		**$ 77.16**		

Mutual funds

Description	Number of shares	Price	Market value	Comment
SLH PORTFOLIO SECTOR ANALYSIS	285.373	$ 11.69	$ 3,336.01	
SLH HIGH YIELD FUND	22.642	13.44	304.31	
SLH PORTFOLIO HIGH INCOME	309.044	10.61	3,278.96	
Total value of mutual funds			**$ 6,919.28**	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 90 A SER-FR UNDIV INT	2,675	$ 1.027			$ 2,747.23	
Total value of unit investment trusts				**$ 0.00**	**$ 2,747.23**	

3636

Account number 685-60527-14 240

Direct investments/insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Hutton or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Hutton. We will continue to show each investment throughout the life of the direct investment insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/19/90	Sold	UTS UNCOMMON VALUES UT # 89 Q SER-FR UNDIV INT ROLLOVER FILLED	-2,560	$ 1.068	$ 2,735.62
07/19/90	Bought	UTS UNCOMMON VALUES UT # 90 A SER FR UNDIV INT ROLLOVER FILLED FULL PRICE IS 1.02241000	2,675	1.022	-2,734.95
Total securities bought and other subtractions					$ -2,734.95
Total securities sold and other additions					$ 2,735.62

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Hutton on your behalf. It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
07/27/90	SLH HIGH YIELD FUND	255	$ 13.44	$ 3.43
07/27/90	SLH PORTFOLIO HIGH INCOME	3,314	10.61	35.16
Total automatic reinvestments				**$ 38.59**

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Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
07/27/90	SLH HIGH YIELD FUND CASH DIV RECORD 07/20/90 PAY 07/27/90	$ 3.43			$ 3.43
07/27/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 07/20/90 PAY 07/27/90	35.16			35.16
Total dividends earned		**$ 38.59**	**$ 0.00**		**$ 38.59**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
07/13/90	SLH DAILY DIVIDEND FUND	$ .06		Reinvested	$ .06
Total earnings from money funds		**$ .06**	**$ 0.00**		**$ .06**

Other income

Date	Description	Comment	Amount
07/17/90	BALCOR EQUITY PEN INV III DISTRIBUTION 13251846681068		$ 26.64
07/17/90	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846635591		36.16
Total other income			**$ 62.80**

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			**$ 13.63**
07/16/90	Autoinvest	SLH DAILY DIVIDEND FUND	62.80	62.80
07/20/90	Autoinvest	SLH DAILY DIVIDEND FUND	.67	.67
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	.06	.06
	Closing money funds balance			**$ 77.16**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

SS # 236-78-8645

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717 421 3100

Preferred client service center 1-800 232 4454

Account number 685-60527-14 24

As you requested, copies of this statement have also been sent to

TERRY SHEPHERD
N JOE RAHALL

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

Account value

Money funds		$ 28 26
Mutual funds		6 [illegible] 98
Unit investment trusts		[illegible] 45
Direct investment insurance		(see Portfolio details)
Net value this period		$ 8 421 69
Net value last period	$ 9,743 67	

Earnings summary

	This period	This year
Dividends	$ [illegible]	$ [illegible]
Money funds earnings	[illegible]	[illegible]
Total	$ 79 52	$ 320 47

Additional summary information

	This period	This year
Other income	$ 0 00	$ 531 [illegible]

NOW YOU CAN RECEIVE ALL YOUR SHEARSON LEHMAN BROTHERS ACCOUNT STATEMENTS IN ONE ENVELOPE WHENEVER POSSIBLE.

Beginning next month, we will be able to consolidate your account statements in one envelope. Please read this month's enclosed newsletter for more information. If you do not want to take advantage of this new service, please contact your Financial Consultant within 30 days.

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Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 77 16**
Automatic reinvestments		-78 42	
Dividends credited	78 42		
Money funds earnings reinvested	1 10		
Total	$ 79 52	$ -78 42	
Combined closing cash and money funds balance			**$ 78 26**

Money funds	78 26

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0 00	$ 0 00	$ 2,000 00	$ 2,000 00
Contributions for the current tax year	0 00	0 00	0 00	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/28/90.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
SLH DAILY DIVIDEND FUND	78.26	$ 78 26	7.472%	Accrued dividends of $ 0.26
Total value of money funds		**$ 78.26**		

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SHEARSON LEHMAN BROTHERS

Account number 685-60527-14 240

Mutual funds

Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	285 373	$ 10.31	$ 2,942.20	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	23.199	12.15	281.87	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	316.277	9.64	3,048.91	
Total value of mutual funds			$ 6,272.98	

Unit investment trusts

Description	No. of units	Price	Yield	Annualized annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 90 A SER FR UNDIV INT	2,675	$ [illegible]			$ [illegible]	
Total value of unit investment trusts				$ 0.00	$ 2,070.45	

Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date [illegible]
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date [illegible]
Total direct investments/insurance	$ 8,000.00	

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
08/31/90	SLH HIGH YIELD FUND	[illegible]	$ [illegible]	$ [illegible]
08/31/90	SLH PORTFOLIO HIGH INCOME	3.565	10.14	35.54

3641

Investment activity *continued*

Automatic reinvestments

Date	Description	Quantity	Price	Amount
09/28/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.286	$ 12.15	$ -3.48
09/28/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.728	9.64	-35.94
Total automatic reinvestments				**$ -78.42**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
08/31/90	SLH HIGH YIELD FUND CASH DIV RECORD 08/24/90 PAY 08/31/90	$ 3.46			$ 3.46
08/31/90	SLH PORTFOLIO HIGH INCOME CASH DIV RECORD 08/24/90 PAY 08/31/90	35.54			35.54
09/28/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 09/21/90 PAY 09/28/90	3.48			3.48
09/28/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 09/21/90 PAY 09/28/90	35.94			35.94
Total dividends earned		**$ 78.42**	**$ 0.00**		**$ 78.42**

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
08/10/90	SLH DAILY DIVIDEND FUND	$ .46		Reinvested	$ .46
09/14/90	SLH DAILY DIVIDEND FUND	.64		Reinvested	.64
Total earnings from money funds		**$ 1.10**	**$ 0.00**		**$ 1.10**

October 1 - October 28, 1990

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
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701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred client service center 1-800-232-4454

Account number 685-60527-14 240
As you requested copies of this statement have also been sent to

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 149.58
Mutual funds	6,050.05
Unit investment trusts	2,094.53
Direct investments/insurance	*(see Portfolio details)*
Net value this period	**$ 8,294.16**
Net value last period	**$ 8,421.69**

Earnings summary

	This period	This year
Dividends	$ 39.90	$ 338.02
Money funds earnings	52	25.87
Total	**$ 40.42**	**$ 363.89**

Additional summary information

	This period	This year
Other income	$ 70.60	$ 6[illegible].92

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 78.26
Automatic reinvestments		-39.90	
Dividends credited	39.90		
Money funds earnings reinvested	52		
Other income credited	70.60		
Total	$ 111.22	$ -39.90	
Combined closing cash and money funds balance			$ 149.58

Money funds	149.58

IRA activity summary

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The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0.00	$ 0.00	$ 2,000.00	$ 2,000.00
Contributions for the current tax year	0.00	0.00	0.00	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/26/90.

ney funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS DAILY DIVIDEND FUND (FORMERLY SLH DAILY DIVIDEND FUND)	149.58	$ 149.58	7.443%	Accrued dividends of $ 0.39
Total value of money funds		**$ 149.58**		

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Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	285.373	$ 9.93	$ 2,833.75	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	23.503	11.63	273.34	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	320.235	9.19	2,942.96	
Total value of mutual funds			**$ 6,050.05**	

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Description	No. of units	Price	Yield	Anticipated annual income	Market value	Comment
UTS UNCOMMON VALUES UT # 90 A SER-FR UNDIV INT	2,675	$ .783			$ 2,094.53	
Total value of unit investment trusts				**$ 0.00**	**$ 2,094.53**	

3644

Account number 685-60527-14 240

ect estments/ urance

We provide the following information about direct investments/insurance as an aid to your financial record keeping It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise Face amounts do not necessarily reflect current market value

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

Transaction details

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Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
10/26/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	304	$ 11.63	$ 3.53
10/26/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.958	9.19	-36.37
Total automatic reinvestments				$ -39.90

3645

Account number 685-60527-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. ***Taxable*** *and* ***non-taxable*** *designations refer to the federal income tax status of your securities, not of your account.*

ıidends

Date	Description	Taxable	Non-taxable	Comment	Amount
10/26/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 10/19/90 PAY 10/26/90	$ 3.53			$ 3.53
10/26/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 10/19/90 PAY 10/26/90	36.37			36.37
Total dividends earned		**$ 39.90**	**$ 0.00**		**$ 39.90**

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Date	Description	Taxable	Non-taxable	Comment	Amount
10/12/90	AMERICAN EXPRESS DAILY DIVIDEND FUND	$ .52		Reinvested	$ .52
Total earnings from money funds		**$ .52**	**$ 0.00**		**$ .52**

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Date	Description	Comment	Amount
10/16/90	BALCOR EQUITY PEN INV III DISTRIBUTION 13251846681068		$ 26.64
10/16/90	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846635591		44.16
Total other income			**$ 70.80**

3646

Account number 685-60527-14 240

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 78.26
10/17/90	AutoInvest	AMERICAN EXPRESS DAILY DIVIDEND FUND	70.80	70.80
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	.52	.52
	Closing money funds balance			$ 149.58

October 29 - December 31, 1990

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
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SS # 236-78-8645
Your Financial Consultant

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717-421-3100

Preferred client service center: 1-800-232-4454

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds		$ 151 89
Mutual funds		6,220 82
Unit investment trusts		2,292 48
Direct investments/insurance		(see Portfolio details)
Net value this period		**$ 8,665.19**
Net value last period	**$ 8,294.16**	

Earnings summary

	This period	This year
Dividends	$ 195 47	$ 533 49
Money funds earnings	2 31	28 18
Total	**$ 197 78**	**$ 561 67**

Additional summary information

	This period	This year
Other income	$ 0 00	$ 601 92

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			**$ 149 58**
Automatic reinvestments		-195.47	
Dividends credited	195.47		
Money funds earnings reinvested	2 31		
Total	$ 197.78	$ -195.47	
Combined closing cash and money funds balance			**$ 151 89**

Money funds	151.89

Account number 685-60527-14 240

IRA activity summary

nounts
lded to
ur IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the prior tax year made in the current year	$ 0.00	$ 0.00	$ 2,000.00	$ 2,000.00
Contributions for the current tax year	0.00	0.00	0.00	0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/90

oney funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND (FORMERLY SLH DAILY DIVIDEND FUND)	151.89	$ 151.89	7.22%	
Total value of money funds		**$ 151.89**		

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Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	296.265	$ 10.49	$ 3,107.82	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	24.153	10.91	263.51	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	328.661	8.67	2,849.49	
Total value of mutual funds			**$ 6,220.82**	

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Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 90 A SER-FR UNDIV INT	2,675	$ .857			$ 2,292.48	
Total value of unit investment trusts				$ 0.00	$ 2,292.48	

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Direct investments/ insurance

We provide the following information about direct investments/insurance as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment/insurance unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments/insurance	**$ 6,000.00**	

Transaction details

nvestment ctivity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
11/30/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.318	$ 11.22	$ -3.57
11/30/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	4.134	8.91	-36.83
12/28/90	SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	10.892	10.48	-114 15
12/28/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.332	10.92	-3.62
12/28/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	4.292	8.69	-37.30
Total automatic reinvestments				**$ -195.47**

Earnings details

The tax status of earnings is reliable to the best of our knowledge **Taxable** *and* **non-taxable** *designations refer to the federal income tax status of your securities, not of your account*

Idends

Date	Description	Taxable	Non-taxable	Comment	Amount
11/30/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 11/23/90 PAY 11/30/90	$ 3.57			$ 3.57
11/30/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 11/23/90 PAY 11/30/90	36.83			36.83
12/28/90	SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS CASH DIV RECORD 12/20/90 PAY 12/28/90	114.15			114.15
12/28/90	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 12/20/90 PAY 12/28/90	3.62			3.62
12/28/90	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 12/20/90 PAY 12/28/90	37.30			37.30
Total dividends earned		**$ 195.47**	**$ 0.00**		**$ 195.47**

oney nds arnings

Date	Description	Taxable	Non-taxable	Comment	Amount
11/09/90	AMERICAN EXPRESS® DAILY DIVIDEND FUND	$ .81		Reinvested	$ .81
12/14/90	AMERICAN EXPRESS® DAILY DIVIDEND FUND	1.05		Reinvested	1.05
12/31/90	AMERICAN EXPRESS® DAILY DIVIDEND FUND	.45		Reinvested	.45
Total earnings from money funds		**$ 2.31**	**$ 0.00**		**$ 2.31**

NICK J. RAHALL II
4TH DISTRICT, WEST VIRGINIA

2104 RAYBURN BUILDING
WASHINGTON, DC 20515
(202) 225-3452

815 FIFTH AVENUE
HUNTINGTON, WV 25701
(304) 522-NICK

110½ MAIN STREET
BECKLEY, WV 25801
(304) 252-5000

1005 FEDERAL BUILDING
BLUEFIELD, WV 24701
(304) 325-6222

R K BUILDING
LOGAN, WV 25601
(304) 752-4934

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEES
INTERIOR AND INSULAR AFFAIRS
SUBCOMMITTEES
CHAIRMAN
MINING AND NATURAL RESOURCES
NATIONAL PARKS AND PUBLIC LANDS

PUBLIC WORKS AND TRANSPORTATION
SUBCOMMITTEES
SURFACE TRANSPORTATION
ECONOMIC DEVELOPMENT

L91

June 13, 1991

HAND DELIVERED

(2)

MC

1991 JUN 13 PM 3:13

The Honorable Donnald K. Anderson
Clerk of the U.S. House of
Representatives
H 105 U.S. Capitol
Washington, D.C. 20515

Dear Donn:

I would like to amend my 1990 Financial Disclosure Statement with the following information clarifying the information contained in my earlier filed statement.

Under Part II., Assets, the Nick Joe Rahall, II Trust was properly listed and valued in Category G. This trust is with Shearson Lehman Brothers. A second Nick Joe Rahall, II Trust was also properly listed and valued in Category E. This trust is with Wheat, First Securities. As indicated, full details on these are included in printout 3. The First National Bank located on line two under assets is located in Beckley, West Virginia.

Under Part IV, Transactions, the Hernando County, Florida property was acquired in 1985. I owned a 10% share with my brother and several individuals. This property was placed in a trust for me by my Father, grantor of the trust, without my knowledge. I was unaware of my holdings in this property until its sale in 1990, and received no income from it until this time, which I reported on my most recent statement. I had assumed that the holdings in my trust were fully reported in the attachments I submit each year, but this property was not listed. I would like to request that my former Financial Disclosure Statements from 1985 until 1989 be amended to reflect this holding.

The small plot of land in Fayette Co. listed on my 1989 Statement was listed on my 1990 Statement as "WV Broadcasting / WTNJ -- leased land I own to WV Broadcasting / WTNJ for radio antennae." It was valued in Category B and was listed as "lease of land to WTNJ for antenna" under type of income and the amount of income was indicated.

The disposition of Southern BancShares and Beckley National Bank Stock is that the Beckley National Bank stock was merged into Southern BancShares and these were deposited into my Wheat, First Securities Account and were sold at least in part which is reflected in the printout I provided the Committee.

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

Under Part VI , Tangible Gifts, the Holiday Inn lodging was inadvertently listed under Part VI. and should have been listed under Part VII. Please note that this was for multiple non-consecutive night's lodging, with one two consecutive night's lodging which would be aggregated for reporting purposes to $90.25. In an effort to fully disclose my gifts of lodging, I reported these night's lodgings even though they were below the threshold for reporting.

The WTNJ gift certificate, was comprised of the donations from several individual sources none of whom donated an amount exceeding the $200 gift limit. Again in an effort to fully disclose my tangible gifts, I reported the total amount of the gift certificate even though it was not required

Thank you for including this information with my Statement.

With warm regard, I am

Sincerely,

NICK J. RAHALL, II
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 12:55
U.S. H... ...

HAND DELIVERED

James Marvin Ramstad
(Full Name)

2618 Crosby Road
(Mailing Address)

Wayzata, MN 55391

Filer Status	[X] Member of the U.S. House of Representatives	State: Minnesota District: Third	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Minnesota State Senate	State Senate Salary and perdiem	$26,607	

3654

Reporting Individual's Name

James Marvin Ramstad

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S DC JT	Examples: S ABC Corporation Stock		X								X								X								X
	Examples: George Wash Credit Union Accounts			X									X								X						
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	Pollution Control Revenue Bond - City of Cohasset, MN		X										X						X								
	Pollution Control Revenue Bond - City of Bass Brook, MN			X									X								X						
	Womdworth Farmers Group	X									X							X									
	Tiempo Equities, Ltd. Common Stock			X										X									X				X
	Legislative Retirement Plan *			X																							
	*No income derived																										

For additional assets and unearned income, use next page

3655

Reporting Individual's Name

Name: Marvin Ramstad

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Farm property - North Dakota, four parcels totaling 960 acres (no							X					X											X	(gross		and net)
improvements) and undivided one-half interest in two parcels totaling																										
800 acres (one parcel with farm buildings)																										

Reporting Individual's Name

James Marvin Ramstad

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR.)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Tiempo Equities, Ltd. Common Stock (32,500 shares)		X		10-15-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Dean Witter Reynolds, Inc. (Bond Account)	Margin Account		X					

Reporting Individual's Name

James Marvin Ramstad

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name

James Marvin Ramstad

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Board Member	United Handicapped Federation
Director	Children's Heart Fund
Advisory Board Member	Lake Country Food Bank
Director	University of Minnesota Touchdown Club

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 5, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5-14-91

GPO: 1991 — 17-598 (91)

JIM RAMSTAD
THIRD DISTRICT MINNESOTA

JUDICIARY COMMITTEE

SMALL BUSINESS COMMITTEE

SELECT COMMITTEE ON
NARCOTICS ABUSE AND CONTROL

DISABILITIES TASK FORCE
CoCHAIRMAN

INSIDE MAIL

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
504 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2871

DISTRICT OFFICE
8120 PENN AVENUE SOUTH #152
BLOOMINGTON, MN 55431
(612) 881-4600

1

MC

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 MAY 20 AM 8:15
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

May 17, 1991

The Hon. Donnald K. Anderson
Office of the Clerk
Office of Records and Registration
1036 Longworth House Office Building
Washington, D.C. 20515

Dear Donnald:

Since filing my financial disclosure statement on May 14, I have discovered I neglected to report one liability.

Please use this letter as my amendment to the Financial Disclosure Statement for Calendar Year 1990, dated May 14, 1991.

The following item should have been listed under Part V - Liabilities:

Creditor: Norwest Bank, Wayzata, MN
Type of Liability: Checking account credit reserve
Category of Amount of Value: $10,001 - $15,000

I am sorry for the oversight, but hope this letter explains the additional liability.

Thank you.

Sincerely,

Jim Ramstad

Jim Ramstad
Member of Congress

mc

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Charles Bernard Rangel
(Full Name)

2252 Rayburn House Office Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	XX Member of the U.S. House of Representatives	State New York District 16th C.D.	Officer or Employee	Employing Office
Report Type	XX Annual (May 15)	Amendment	Termination	Termination Date

HAND DELIVERED

MK (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Seimens Corporation (2/12/90)	Speech	1,500.00	
	Detroit Association of Black Organizations (2/25)	"	1,500.00	
	Assn of Community College Trustees (2/26/90)	"	1,500.00	
	Washington Tax Seminar (2/27/90)	"	1,000.00	
	RJR Nabisco (3/9/90)	"	2,000.00	
	Organization Management, Inc. (3/7/90	"	2,000.00	
	Northeastern Regional Association of Small Business Investment Companies (3/22/90)	"	2,000.00	
	Capital Legislative Service (3/28/90)	"	2,000.00	
	General Electric (4/4/90)	"	2,000.00	
	National Review, Inc. (4/20/90)	"	2,000.00	
	NATCO/National Association of TJTC Consultants (6/20/90)	"	2,000.00	
	Distilled Spirits Council of U.S. (4/4/90)	"	2,000.00	
	Johnson & Johnson (5/23/90)	"	1,000.00	
	National Associaton of College and University Business Officers (5/14/90)	"	1,000.00	
	Pfizer (6/27/90)	"	2,000.00	
	National Association of Urban Bankers (6/13/90)	"	1,500.00	$150 to charity

For additional earned income, use next page

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Reporting Individual's Name

Charles Bernard Rangel

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Wall Street Tax Association (7/19/90)	Speech	2,000.00	X
Cable News Network (6/28/90)	"	200.00	X
American Insurance Association (6/26/90)	"	2,000.00	X
The New York Times (8/31/90)	Article	150.00	X
Unocal (9/26/90)	Speech	2,000.00	X
Eli Lilly and Company (10/17/90)	"	1,000.00	X
National Black Child Development Institute (10/10/90)	"	1,500.00	X
Hartford Institute on Insurance Taxation (9/26/90)	"	1,000.00	X
American Council of Life Insurance (10/2/90)	"	1,000.00	X
National Association/Casualty & Surety Executives (10/2/90)	"	2,000.00	X
Christian Science Publishing Society (11/16/90)	Article	100.00	X
Board of Trade/City of Chicago	Speech	1,000.00	X
Chicago Mercantile Exchange (11/29)	"	1,000.00	X

Reporting Individual's Name
Charles Bernard Rangel

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	New England Mutual Life			X											X						X									
	Punta Cana Yacht Club Dominican Republic					X								X									X							

For additional assets and unearned income, use next page

3663

Reporting Individual's Name
Charles Bernard Rangel

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE XXXXX

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Congressional Federal Credit Union	personal loan	XX						
	Freedom National Bank, New York, NY	" "		XX					
	CitiBank, New York, NY	Mortgage on rental property			XX				

3664

Reporting Individual's Name

Charles Bernard Rangel

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [XXX]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel-related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information, see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Detroit Association of Black Organizations		2/25/90	roundtrip air travel NYC/Detroit/Washington	
National Review, Inc.		3/26-17/90	air travel NYC/Charlotte, NC/Washington	
Democratic National Cmte		7/27/90	air travel Washington/Nantucket/New York City	
Arrington & Hollowell		9/21/90	air travel Washington/Atlanta/New York City	
Savings Banks Association of New York State		11/14-17	air travel for self and spouse New York/West Palm Beach (roundtrip)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Charles B. Rangel

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

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CONTINUATION			
Chicago Board of Trade	11/29/90	New York/Chicago/Washington	

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Reporting Individual's Name
Charles B. Rangel

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Board Member	Harlem Urban Development Corporation
Board Member	Harlem International Trade Center Corporation

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [XXX]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

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SIGNATURE OF REPORTING INDIVIDUAL: C B Rangel

DATE (Month, Day, Year): May 15, 1991

GPO: 1991 - 37-598 (m)

CHARLES B. RANGEL
16TH CONGRESSIONAL DISTRICT
NEW YORK

DEPUTY WHIP

COMMITTEES
WAYS AND MEANS
CHAIRMAN SUBCOMMITTEE ON SELECT REVENUE MEASURES
SUBCOMMITTEE ON OVERSIGHT
CHAIRMAN SELECT COMMITTEE ON NARCOTICS ABUSE AND CONTROL

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

☐ 2252 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON DC 20515
TELEPHONE (202) 225-4365

DISTRICT OFFICES
MS. VIVIAN E. JONES
DISTRICT ADMINISTRATOR

☐ 163 WEST 125TH STREET
NEW YORK NY 10027
TELEPHONE (212) 663-3900

☐ 601 WEST 181ST STREET
NEW YORK NY 10033
TELEPHONE (212) 927-5333

☐ 2110 FIRST AVENUE
NEW YORK, NY 10029
TELEPHONE (212) 348-9630

PLEASE RESPOND TO
OFFICE CHECKED

May 15, 1991

8

Honorable Louis Stokes
Chairman
Committee on Standards of
Official Conduct
U.S. House of Representatives
Washington, D. C. 20515

Dear Mr. Chairman:

Please be advised that the following information is submitted to explain the variance between last year's and the current disclosure statement (Parts II and III).

1). Total personal savings account interest did not exceed $5,000.

2. Rental property in New York City (74 West 132nd Street) produced a loss.

Sincerely,

CHARLES B. RANGEL
Member of Congress

CBR/pob

1991 MAY 15 PM 4:15

CHARLES B. RANGEL
18TH CONGRESSIONAL DISTRICT
NEW YORK
DEPUTY WHIP
COMMITTEES
WAYS AND MEANS
CHAIRMAN, SUBCOMMITTEE ON SELECT REVENUE MEASURES
SUBCOMMITTEE ON OVERSIGHT
CHAIRMAN, SELECT COMMITTEE ON NARCOTICS ABUSE AND CONTROL

Congress of the United States
House of Representatives
Washington, DC 20515

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DISTRICT OFFICES
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NEW YORK, NY 10027
TELEPHONE (212) 663-3900
807 WEST 181ST STREET
NEW YORK, NY 10033
TELEPHONE (212) 927-5333
2116 FIRST AVENUE
NEW YORK, NY 10029
TELEPHONE (212) 348-8830
PLEASE RESPOND TO
OFFICE CHECKED

June 4, 1991

HAND DELIVERED

Honorable Louis Stokes
Chairman
Committee on Standards of
Official Conduct
U.S. House of Representatives
Washington, D. C. 20515

MC

9

Dear Mr. Chairman:

Pursuant to your letter of May 22, 1991, I wish to amend Parts II and III, Assets and "Unearned" Income, of my Financial Disclosure Statement by including rental property at 74 West 132nd Street, New York, New York. This property is valued at between $50,000 - $100,000 and gross rent received was between $15,000 - $50,000.

Respectfully submitted,

CHARLES B. RANGEL
Member of Congress

CBR/pob

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:15
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only)

1991 JUN -4 AM 10:4

3670

Charles Bernard Rangel
(Full Name)

2252 Rayburn House Office Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	XX Member of the U S House of Representatives	State New York District 16th C.D.	Officer or Employee	Employing Office
Report Type	XX Annual (May 15)	Amendment	Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Seimens Corporation (2/12/90)	Speech	1,500.00	
	Detroit Association of Black Organizations (2/25)	"	1,500.00	
	Assn of Community College Trustees (2/26/90)	"	1,500.00	
	Washington Tax Seminar (2/27/90)	"	1,000.00	
	RJR Nabisco (3/9/90)	"	2,000.00	
	Organization Management, Inc. (3/7/90	"	2,000.00	
	Northeastern Regional Association of Small Business Investment Companies (3/22/90)	"	2,000.00	
	Capital Legislative Service (3/28/90)	"	2,000.00	
	General Electric (4/4/90)	"	2,000.00	
	National Review, Inc. (4/20/90)	"	2,000.00	
	NATCO/National Association of TJTC Consultants (6/20/90)	"	2,000.00	
	Distilled Spirits Council of U.S. (4/4/90)	"	2,000.00	
	Johnson & Johnson (5/23/90)	"	1,000.00	
	National Associaton of College and University Business Officers (5/14/90)	"	1,000.00	
	Pfizer (6/27/90)	"	2,000.00	
	National Association of Urban Bankers (6/13/90)	"	1,500.00	$150 to charity

For additional earned income, use next page

Reporting Individual's Name

Charles Bernard Rangel

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Wall Street Tax Association (7/19/90)	Speech	2,000.00	X
Cable News Network (6/28/90)	"	200.00	X
American Insurance Association (6/26/90)	"	2,000.00	X
The New York Times (8/31/90)	Article	150.00	X
Unocal (9/26/90)	Speech	2,000.00	X
Eli Lilly and Company (10/17/90)	"	1,000.00	X
National Black Child Development Institute (10/10/90)	"	1,500.00	X
Hartford Institute on Insurance Taxation (9/26/90)	"	1,000.00	X
American Council of Life Insurance (10/2/90)	"	1,000.00	X
National Association/Casualty & Surety Executives (10/2/90)	"	2,000.00	X
Christian Science Publishing Society (11/16/90)	Article	100.00	X
Board of Trade/City of Chicago	Speech	1,000.00	X
Chicago Mercantile Exchange (11/29)	"	1,000.00	X

Reporting Individual's Name

Charles Bernard Rangel

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S	ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
✓	New England Mutual Life	X											X						X							
✓	Punta Cana Yacht Club Dominican Republic			X								X									X					

For additional assets and unearned income, use next page

3672

Reporting Individual's Name
Charles Bernard Rangel

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [XXXXX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Congressional Federal Credit Union	personal loan	XX						
	Freedom National Bank, New York, NY	" "		XX					
	CitiBank, New York, NY	Mortgage on rental property			XX				

Reporting ...
Charles Bernard Rangel

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

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NONE [XXX]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

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Reporting Individual's Name
Charles B. Rangel

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Reporting Individual's Name
Charles B. Rangel

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Board Member	Harlem International Trade Center Corporation

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Date	Parties To	Terms of Agreement

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SIGNATURE OF REPORTING INDIVIDUAL: C B Rangel

DATE (Month, Day, Year): May 15, 1991

GPO 1991 17 598 (m)

3676

CHARLES B. RANGEL
18TH CONGRESSIONAL DISTRICT
NEW YORK
DEPUTY WHIP
COMMITTEES
WAYS AND MEANS
CHAIRMAN, SUBCOMMITTEE ON
SELECT REVENUE MEASURES
SUBCOMMITTEE ON OVERSIGHT
CHAIRMAN, SELECT COMMITTEE ON
NARCOTICS ABUSE AND CONTROL

Congress of the United States
House of Representatives
Washington, DC 20515

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601 WEST 181ST STREET
NEW YORK, NY 10033
TELEPHONE (212) [illegible]
2110 FIRST AVENUE
NEW YORK, NY 10029
TELEPHONE (212) 348-8830
PLEASE RESPOND TO
OFFICE CHECKED

May 15, 1991

HAND DELIVERED

Honorable Louis Stokes
Chairman
Committee on Standards of
Official Conduct
U.S. House of Representatives
Washington, D. C. 20515

1991 JUN -4 AM 10:41
1991 MAY 15 PM 4:15
U.S. HOUSE OF REPRESENTATIVES

Dear Mr. Chairman:

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2. Rental property in New York City (74 West 132nd Street) produced a loss.

Sincerely,

CHARLES B. RANGEL
Member of Congress

CBR/pob

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990	FORM A For use by Members, officers, and employees

ARTHUR RAVENEL JR
(Full Name)

635 East Bay Street
(Mailing Address)

Charleston SC 29403

Filer Status	[X] Member of the U.S. House of Representatives	State: SC District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED

MC (Office Use Only) 11

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	FIDELITY INVESTMENT & TRUST INC	Management Fee	$1,500	
	ARTHUR RAVENEL JR & COMPANY INC	Spouse Salary	N/A	
	STATE OF SOUTH CAROLINA	Pension for service in legislature	$6,909	

For additional earned income, use next page

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Reporting Individual's Name
ARTHUR RAVENEL JR

PARTS II and III—ASSETS AND "UNEARNED" INCOME

- In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
S	55 Drake St, Charleston SC					X							X									X						
S	185 Rutledge St, Charleston SC						X						X										X					
S	Commercial Property, Union SC				X								X									X						
JT	Audubon Arms, Charleston SC							X					X										X					X
JT	V Staubes Real Estate Mortgage							X						X										X				X
	527 acres, Spring Grove SC								X				X					Future Development			X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: ARTHUR RAVENEL JR

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	So National Bank Charleston SC		X										X						X								
	SC National Bank Charleston SC		X										X							X							
S	US Treasury Bond		X										X						X								
	Merrill Lynch Money Account		X										X						X								
S	Merrill Lynch Money Account			X									X							X							
S	Interstate/Johnson Lane		X										X						X								
S	Estate of M L Rickenbaker	X											X						X								X
	West Ashley Awning & Mfg Co						X				X							X									
	Arthur Ravenel Jr & Co					X					X							X									
	Bank of New England			X							X							X									X
	Circle K Corp			X							X							X									X
	Ryans Family Steak House			X							X							X									
S	Eastman Kodak		X								X								X								
S	Bank of Boston			X							X									X							X
S	Chase Manhattan			X							X										X						X

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: ARTHUR RAVENEL JR

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Bank of New Hampshire		X								X								X								X
S	Chemical Banking		X								X								X								X
S	Citicorp			X							X									X							X
S	Ford Motor			X							X								X								X
S	GMC					X					X											X					X
S	Manu Hanover				X						X									X							X
S	Revere Fund		X								X								X								X
S	Ryans Family Steak House				X						X							X									X
S	Scana		X								X							X									X
S	TJX		X								X								X								
S	Source Capital				X						X									X							X
S	Zweig Fund				X						X											X					X
S	Amer Info Tech		X								X							X									X
S	AT&T			X							X							X									X
S	Bell Atlantic		X								X							X									X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: ARTHUR RAVENEL JR

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Bellsouth		X								X							X									X
S	NYNEX		X								X							X									X
S	PacTel		X								X							X									X
S	SW Bell		X								X							X									X
S	US West		X								X							X									X
S	Exxon			X							X								X								X
S	Estate of M L Rickenbaker	X									X											X					X

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Reporting Individual's Name
ARTHUR RAVENEL JR

PART IV – TRANSACTIONS

Report any purchase, sale or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				
JT	Audubon Arms Apts, Charleston SC [foreclosed on not]			X	11/01/90					X		
JT	V Stroubes Real Estate Mortgage [exchanged for above]			X	11/01/90					X		
S	Estate of M L Rickenbaker [estate closed]			X	06/30/90				X			
	Bank of New England	X			08/24/90		X					
	Circle K Corp	X			05/23/90		X					

See continuation sheets

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 182 Main St, Dover, Del				X			
	SC Federal Savings	Mortgage 55 Drake St Chstn	X						
	City Federal Mortgage Co	Mortgage 185 Rutledge Chstn		X					
	Bevia Denning	Mortgage 527 ac Spring Grove SC				X	4		

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Reporting Individual's Name

ARTHUR RAVENEL JR

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Chemical Banking	X			07/17/90	X						
S	Revere Fund	X			02/16/90	X						
S	Bank of Boston	X			09/20/90		X					
S	Bank of New Hampshire	X			08/30/90		X					
S	Manu Hanover	X			12/10/90		X					
S	CitiCorp	X			10/04/90		X					
S	Chase Manhattan	X			12/05/90		X					
S	GMC	X			08/31/90		X					
S	Ford Motor	X			09/04/90		X					
S	Source Capital		X		08/27/90			X				
S	Zweig Fund		X		08/27/90			X				
S	Amer Info Tech		X		09/17/90	X						
S	AT&T		X		09/17/90		X					
S	Bell Atlantic		X		09/17/90	X						

Reporting Individual's Name
ARTHUR RAVENEL JR

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	Bellsouth		X		09/17/90	X						
S	NYNEX		X		09/17/90	X						
S	PacTel		X		09/17/90	X						
S	SW Bell		X		09/17/90	X						
S	US West		X		09/17/90	X						
S	Exxon		X		11/19/90		X					
S	Amer Info Tech Inheritance			X	06/01/90	X						
S	AT&T Inheritance			X	06/01/90		X					
S	Bell Atlantic Inheritance			X	06/01/90	X						
S	Bellsouth Inheritance			X	06/01/90	X						
S	Exxon Inheritance			X	06/01/90		X					
S	GMC Inheritance			X	06/01/90			X				
S	NYNEX Inheritance			X	06/01/90	X						
S	PacTel Inheritance			X	06/01/90	X						

Reporting Individual's Name

ARTHUR RAVENEL JR

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets		Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock		X			10-12-90			X				
S	Ryans Family Steak House	Inheritance			X	06/01/90	X						
S	Scana	Inheritance			X	06/01/90	X						
S	Source Capital	Inheritance			X	06/01/90			X				
S	SW Bell	Inheritance			X	06/01/90	X						
S	US West	Inheritance			X	06/01/90	X						
S	Zweig Fund	Inheritance			X	06/01/90		X					

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Reporting Individual's Name

ARTHUR RAVENEL JR

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Sponsor: Chinese National Assoc of Industry & Commerce	Aug 6-12 1990	Roundtrip Air Fare for 2 to Taipei, Taiwan and 5 nights lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Individual's Name

ARTHUR RAVENEL JR

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
President	Arthur Ravenel jr & Co, Charleston SC
President	West Ashley Awning & Mfg Co, Charleston SC
President	Fidelity Investment & Trust Inc, Charleston SC
Presient	The Charleston Corporation, Charleston SC

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
✓ Arthur Ravenel Jr	✓ 5/14/91

GPO 1991 37-698 (m)

3688

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Richard B. Ray
(Full Name)

225 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Georgia District: 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE [ ]

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
AT&T, Inc (January 22, 1990)	Speech	$ 2000	
Gordon College (May 29, 1990)	Speech	$ 200	
Waste Management, Inc (June 11, 1990)	Speech	$ 2000	
National Federal of Independent Businesses (August 25, 1990)	Speech	$ 1000	
National Soft Drink Association (September 11, 1990)	Speech	$ 2000	
King & Spalding (September 17, 1990)	Speech	$ 2000	
Chicago Board of Trade (November 12, 1990)	Speech	$ 750	
Chicago Mercantile Exchange (November 12, 1990)	Speech	$ 750	

For additional earned income, use next page

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Reporting Individual's Name
RICHARD B. RAY

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	MLPFS Cust FPD Richard Ray IRA		X														IRA		X								
JT	Columbus Bank & Trust Accounts Columbus, Georgia		X										X					X									
JT	Middle Georgia Bank Account Byron, GA	X											X					X									
S	First American Bank of Va Account Alexandria, VA	X											X					X									
S	Georgia Municipal Electric Bonds						X						X										X				
S	Burke County Georgia Municipal Bonds					X							X									X					

For additional assets and unearned income, use next page

3690

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: RICHARD B. RAY

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Savannah Georgia Municipal Bond		X										X						X								
S	Waycross Georgia Municipal Bond			X									X							X							
S	Monroe County Georgia Municipal Bond			X									X							X							
S	Fulton County Georgia Municipal Bond			X									X							X							
	McMullen Mortuary Inc, Columbus GA		X										X					X									
S	1895, 1915, 2090 Second Street Macon, Georgia				X							X										X					
JT	#5 Maryland Court Duplex Columbus, GA					X						X											X				
JT	Land & Buildings, Rum Road Peach County, Byron GA						X					X										X					

Financial Disclosure A 2(a)

Reporting Individual's Name
RICHARD B. RAY

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Decatur Federal Savings & Loan, Decatur GA	Mortgage on 5 Maryland Ct, Cols GA				X			
JT	Middle Georgia Bank, Byron GA	Mortgage on Rum Road, Byron GA					X		
	Columbus Bank & Trust, Columbus GA	Collateral Note		X					
	Columbus Bank & Trust, Columbus GA	Collateral Note		X					
JT	The Citizens Bank, Fort Valley GA	Collateral Note			X				
	Trust Company Bank, Columbus GA	Personal Note				X			

3692

Reporting Individual's Name
RICHARD B. RAY

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
AT&T Bell Laboratories	1/22/90	Roundtrip Air from Washington D.C. to New Jersey	
Waste Management, Inc	6/11/90	Airfare from Atlanta to Chicago to Washington D.C.	
National Federation of Ind. Business	8/24-26/90	Roundtrip Air from Atlanta to Colorado Springs, 3 days food and lodging, self and spouse	
Chicago Mercantile Exchange	11/12/90	One Way Air from Washington, D.C. to Chicago	
Chicago Board of Trade	11/12/90	One Way Air from Chicago to Washington, D.C.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
RICHARD B. RAY

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C. app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U S C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Richard Ray

DATE (Month, Day, Year): 5/14/91

GPO 1991 37-598 (m)

COMMITTEE ON ARMED SERVICES
COMMITTEE ON SMALL BUSINESS

RICHARD RAY
3rd DISTRICT, GEORGIA

91

United States Congress
House of Representatives
Washington, DC 20515

(1)

HAND DELIVERED

May 15, 1991

91 MAY 15 PM 4:47
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

✓
MC

Mr. Donnald Anderson
Clerk of the House
H105 Capitol
Washington, D.C. 20515

Dear Sir:

I would like to request that you amend my Financial Disclosure Statement, submitted today, May 15, 1991, in the following section:

PART II AND III - ASSETS AND UNEARNED INCOME
(continuation sheet)

In this section, the value of McMullen Mortuary Inc is listed in category B. It should be in category C.

Please utilize this letter in the appropriate manner to amend my statement. Thank you for your assistance in this matter.

Sincerely,

Richard Ray

RICHARD RAY
Member of Congress

225 CANNON OFFICE BLDG • WASHINGTON, DC • (202) 225-5901 • TOLL FREE (GA) 1-800-282-5007
THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 15 PM 3:24
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(Office Use Only) 6

John F. Reed
(Full Name)

1229 Longworth HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State: RhodeIsland District: 2nd	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of Rhode Island	Senate Salary	$300.00	
	Edwards & Angell, Providence, RI. Law Firm	Salary	$ 7.91	

For additional earned income, use next page

3696

Reporting Individual's Name
John F. Reed

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding [illegible] which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income [illegible] Exclude: Any personal residence owned by the reporting individual by a spouse, child, parent or sibling of the reporting individual or that [illegible] $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which [illegible] $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income [illegible] than $[illegible] received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If [illegible] Section II on page A-3. For more details, see Instructions, **pages 12-14**.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, [illegible] in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE [ ]

BLOCK A Asset and/or Income Source	BLOCK B Category of Value									BLOCK C Type of Income							BLOCK C Category of Amount of Income									Block D
Identity each asset and/or income source of yours, your spouse (S) and your dependent child (DC)	A None for less than $1,000	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	Indicate if asset or income source [illegible] (X) Attach explanation	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Other Income (Specify type)	I None	II $1,001 - $2,500	III $2,501 - $5,000	IV $5,001 - $15,000	V $15,001 - $50,000	VI $50,001 - $100,000	VII $100,001 - $1,000,000	VIII Over $1,000,000		Transaction (X)
S DC JT Examples: S ABC Corporation Stock		X								X								X								X
George Wash. Credit Union Accounts			X									X								X						
182 Main Street, Dover, Delaware				X							X								X							
Citizens Bank - NOW Acct.		X										X						X								
Fleet National Bank - NOW Acct.	X											X					X									
Fidelity Cash Reserves	X									X							X									
Edwards & Angell - Pension			X													Pension Distribution					X					X
California Biotechnology Stock (IRA)		X															X									
E & H Marine Stock (IRA)	X																X									

For additional assets or unearned income, [illegible]

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John F. Reed

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A None or less than $1,000	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	Transaction (X)
A.G. Edwards Stock (IRA)		X															X								
Forum Group Stock (IRA)	X																X								
McDonald & Co. Stock (IRA)		X															X								
AG Edwards Cash Fund (IRA)	X																	X							
Colonial Bond Fund (IRA)		X																X							
EVILCO Insurance Policy		X							Cash Surrender																
JT 80 Knowlesway, Narragansett, RI				X																					

Reporting Individual's Name: John F. Reed

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR.)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Edwards & Angell - Pension Distribution				12-28-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Fleet National Bank, Providence, RI	Guarantor on loan to Campaign Committee			X				

Reporting Individual's Name
John F. Reed

PART VI – TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel related expenses provided by federal, state, and local governments, or by a foreign government.* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3700

Reporting Individual's Name

John F. Reed

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Director	Ocean State Adoption Resource Exchange
Director	Independent Living Authority
Director	Volunteers in Cranston Schools
Director	Sophia Little Home

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
Present	I retain $7,600.00 in Edwards & Angell Retirement Plan awaiting distribution	Defined contributions plan. Since I am no longer an employee, no contributions are being made.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See instructions, page 15.) Yes ☐ No ☐ NA ☒

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See instructions, page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6 § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6 § 104 and 18 U.S.C. § 1001.)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John F. Reed	May 25, 1991

3701

JOHN F. REED
2D DISTRICT, RHODE ISLAND

COMMITTEES
EDUCATION AND LABOR
JUDICIARY
MERCHANT MARINE AND FISHERIES

Congress of the United States
House of Representatives
Washington, DC 20515

PLEASE RESPOND TO
WASHINGTON
☐ 1229 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-2735
DISTRICT
☐ 355 CENTERVILLE ROAD
BUILDING 3
WARWICK, RI 02886
(401) 737-2900

8

HAND DELIVERED

MC

June 25, 1991

Clerk
U.S. House of Representatives
Office of Records & Registration
1036 Longworth HOB
Washington, D.C. 20515

Gentlemen:

I am writing to amend my Financial Disclosure form filed May 15, 1991 as follows:

Parts II and III - Assets and Unearned Income

Type of income for the following stock: California Biotechnology Stock (IRA); E & B Marine Stock (IRA); Forum Group Stock (IRA); McDonald & Co. Stock (IRA); A.G. Edwards Stock (IRA):

The stock is held in my individual retirement account and any income is attributable to dividends. However, the principal and income on such stock can only be withdrawn subject to the payment of taxes and penalties pursuant to I.R.S. regulations.

Type of income for the following: A.G. Edwards Cash Fund (IRA); Colonial Bond Fund (IRA):

These are mutual funds which are also part of my IRA account. Income is generated by dividends. Withdrawals are subject to the constraints described above.

Type of income for property located at 80 Knowlesway, Narragansett, R.I. is as follows:

Block C should be marked at item I, (i.e., none of the above or less than $201). No income was realized during the reporting period.

I believe this completes the recent request for clarification as to the type of income in Parts II and III. If you have any questions or require any additional information please feel free to call me at (202) 225-2735.

Sincerely,

Jack Reed

Jack Reed
Member of Congress

JR:mkd

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

For use by Members, officers, and employees

John F. Reed
(Full Name)

1229 Longworth HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State RhodeIsland District 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

HAND DELIVERED

(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of Rhode Island	Senate Salary	$300.00	
	Edwards & Angell, Providence, RI. Law Firm	Salary	$ 7.91	

For additional earned income, use next page

3704

John F. Reed

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding [illegible] as of the close of the year and (b) any other asset or source of unearned income [illegible] individual by a spouse, child, parent or sibling of the reporting individual [illegible] interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A [illegible] at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of unearned income [illegible] from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. [illegible] on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, [illegible] the column for that purpose on the far left. (This is optional.) See instructions, page 11.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset									BLOCK C Income																						Block D
		Category of Value (*)									Type of Earning (*)								Category of Amount of Income (*)														
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A	B	C	D	E	F	G	H	[illegible]							Other Income (Specify type)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV	Transaction (X)
S DC JT	Examples: S — ABC Corporation Stock																		X														X
	George Wash. Credit Union Accounts			X									X								X												
	182 Main Street, Dover, Delaware				X															X													
	Citizens Bank - NOW Acct.		X										X						X														
	Fleet National Bank - NOW Acct.	X											X					X															
	Fidelity Cash Reserves	X									X							X															
	Edwards & Angell - Pension			X													Pension Distribution						X										X
	California Biotechnology Stock (IRA)		X															X															
	E & B Marine Stock (IRA)	X																X															

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

John F. Reed

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	A.G. Edwards Stock (IRA)		X															X								
	Forum Group Stock (IRA)	X																X								
	McDonald & Co. Stock (IRA)		X															X								
	AG Edwards Cash Fund (IRA)	X																	X							
	Colonial Bond Fund (IRA)		X																X							
	EVILCO Insurance Policy		X							Cash Surrender																
JT	80 Knowlesway, Narragansett, RI				X													X								

Financial Disclosure A-2(a)

3706

Reporting Individual's Name: John F. Reed

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Edwards & Angell - Pension Distribution				12-28-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Fleet National Bank, Providence, RI	Guarantor on loan to Campaign Committee			X				

3707

John F. Reed

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

3708

Reporting Individual's Name: John F. Reed

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Director	Ocean State Adoption Resource Exchange
Director	Independent Living Authority
Director	Volunteers in Cranston Schools
Director	Sophia Little Home

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
Present	I retain $7,600.00 in Edwards & Angell Retirement Plan awaiting distribution	Defined contributions plan. Since I am no longer an employee, no contributions are being made.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA ☒

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John F. Reed	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
91 MAY 15 PM 4:09
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) (6)

Ralph Regula
(Full Name)

2207 Rayburn HOB
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio District: 16th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Phillip Morris, Inc.	Article	500.	x
	American Council on Education	Speech	1,000.	x
	Bethlehem Steel	Speech	1,000.	x
	American Iron & Steel Institute	Speech	2,000.	x
	Stark County Medical Society	Speech	1,000.	x
	Brookings Institute	Speech	400.	x
	Ohio Public Employees Retirement System	Employer-Employee Funded Retirement	4,450.	

For additional earned income, use next page

3710

Reporting Individual's Name

Ralph Regula

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details see Instructions pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																		Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock		X								X							X									X
			George Wash. Credit Union Accounts			X									X							X							
			182 Main Street, Dover, Delaware				X							X							X								
	United Bank-Debenture, Stocks and Savings, including IRA						X						X		X							X							X
	VanDorn-Stock					X							X								X								
	J.M. Smucker-Stock					X							X							X									
	Duquesne Light-Stock				X								X							X									
	Navarre Deposit Bank, Stock and savings, including IRA					X							X		X					X									
	Florida House (1/2) Bayview Estates, Largo, Florida					X								X							X								

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Ralph Regula

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Navarre Baptist Temple-Mortgage			x									x						x								
	Maple Park Manor - Partnership		x										x						x								
	Undivided 1/2 int. in 122 acres, Bethlehem Twp., Stark County, Ohio				x												Royalty			x							
	200 acres, Bethlehem Twp., Stark County, Ohio (exclusive of residence)				x												Royalty			x							
	Dwelling - Bethlehem Twp., Stark County, Ohio			x										x								x					Sold
	T&C Credit Union, Canton, Ohio IRA (Savings Account)		x										x						x								
	First Savings, Massillon, Ohio IRA (Savings Account)		x										x						x								
	Regula Bros., Beach City, Ohio - Partnership - Livestock, Farm				x												Partnership Distribution		X								
	Equipment, Transportation Equipment																										

3712

Reporting Individual's Name: Ralph Regula

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO., DAY, YR.)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	United Bank Stock	X				X						
	Dwelling - Bethlehem Twp., Stark County, Ohio		X				X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	First Savings & Loan, Massillon, Ohio	Business Loan (Paid off in 1990)		X					
	United Bank - Mortgage	Farm Mortgage on 122 acres in Beth. Twp., Stark County, Ohio(Pd.off in 1990)	X						
	United Bank - Business Loan	Business Loan			X				

3713

Reporting Individual's Name
Ralph Regula

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [ ]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors	Civil War Tapes	$110.

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Ralph Regula

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Regula Brothers Partnership
Trustee	Mt. Union College
Trustee	Stark Wilderness Center
Trustee	McKinley Museum

PART IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO: 1991 — 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

ISS MAY 15 PM 2:43
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

John Jacob Rhodes, III
(Full Name)

326 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: AZ District: 01	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Sheehan Associates - spouse	Salary	N/A	
	SMACNA 3/2/90	Speech	$1,000	
	Al Collins Graphic Design School Commencement 3/3/90	Speech	$1,000	
	Nat'l Parks Concessioners 3/14/90	Speech	$1,000	
	Nat'l Assn. of Trade & Technical Schools 5/8/90	Speech	$2,000	
	General Atomics 6/29/90	Speech	$1,000	
	Western States Water & Power Consumer Conference 10/11/90	Speech	$2,000	

For additional earned income, use next page

3716

Reporting Individual's Name

John Jacob Rhodes, III

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Cong. Fed. Credit Union		X										X							X							
DC	Philadelphia Savings Fund		X										X						X								
DC	Investment Co. of America		X								X									X							
DC	Webster Cash Reserve		X								X									X							
DC	U.S. West		X								X									X							
DC	NYNEX		X								X									X							

For additional assets and unearned income, use next page

3717

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John Jacob Rhodes, III

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	BellSouth		X								X									X							
DC	Bell Atlantic		X								X									X							
DC	Shearson Lehman			X							X										X						
DC	Sun National Bank	X											X					X									
S	Janet Anderson Trust		X										X									X					
S	James Anderson Trust		X										X								X						
DC	Exxon Shipping Co.		X								X									X							

Reporting Individual's Name: John Jacob Rhodes, III

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Valley National Bank	Personal		X					

3719

ng Individual's Name

John Jacob Rhodes, III

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (dis... in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Congressional Institute	2/22-24/90	Roundtrip train travel Wash. D.C. - Princeton, N.J. Food, lodging, self, spouse, child	
Congressional Institute	11/30-12/2/90	Food, lodging - St. Michaels, Maryland Self and spouse	
Far East Studies Inst. & the Chinese Peoples Inst. of Foreign Affairs	11/11-11/18/90	Roundtrip air travel from Wash. D.C. to People's Republic of China - Food, lodging - Self & spouse	
American President Lines	11/18-11/20/90	Food, lodging, and transportation in HongKong, Self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3720

Reporting Individual's Name

John Jacob Rhodes, III

PART VIII – POSITIONS

Report the identity of all positions compensated or uncompensated held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J. J. Rhodes	5-12-91

(PO) 1991 32-598 (m)

3721

JOHN J. RHODES, III
1ST DISTRICT, ARIZONA

OFFICES:
412 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2635

2345 SOUTH ALMA SCHOOL ROAD
SUITE 108
MESA, AZ 85210
(602) 831-6433

RECEIVED
1991 JUN 7 AM 11: 10
OFFICE OF RECORDS
U.S. HOUSE OF REPRESENTATIVES

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEE ON INTERIOR AND INSULAR AFFAIRS
CHAIRMAN, REPUBLICAN TASK FORCE ON INDIAN AFFAIRS
SUBCOMMITTEES:
WATER, POWER AND OFFSHORE ENERGY RESOURCES
ENERGY AND THE ENVIRONMENT
NATIONAL PARKS AND PUBLIC LANDS
GENERAL OVERSIGHT AND INVESTIGATIONS

COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY

COMMITTEE ON SMALL BUSINESS

REPUBLICAN POLICY COMMITTEE

June 4, 1991

INSIDE MAIL

MC

1

RECEIVED
1991 JUN -7 AM 11: 10
OFFICE OF RECORDS
U.S. HOUSE OF REPRESENTATIVES

The Honorable Donnald K. Anderson
Clerk
U.S. House of Representatives
Office of Records and Registration
1036 Longworth H.O.B.
Washington, D.C. 20515

Dear Mr. Anderson:

This is to amend my Financial Disclosure Statement for calendar year 1990. I have just learned that two items listed in Parts II and III as the Janet Anderson Trust and the James Anderson Trust are incorrect. These trusts have been dissolved and the assets transferred to various beneficiaries, of whom my wife is one.

These assets should have been reported as follows:

PARTS II AND III - ASSETS AND "UNEARNED" INCOME

	Block A	Block B	Block C	
S	U.S. Treasury Note	D	interest	III
S	First Financial Associates, Inc.	D	dividend	III
S	Dreyfus Cash Management	B	interest	II

If you have any questions regarding this amendment or require further information, please let me know.

Sincerely,

John J. Rhodes, III
Member of Congress

THIS STATIONERY PRINTED ON PAPER MADE OF RECYLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1990 MAY 10 PM 4:16

Bill Richardson
(Full Name)

2337 California Street, N.W.
(Mailing Address)

Washington, D.C. 20008

Filer Status	[X] Member of the U.S. House of Representatives	State New Mexico District 3	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Philip Morris Corporation (2/21/90)	Speech	$2,000	X
	Mutual Broadcasting System (1/25/90)	Speech	$1,000	X
	Pathology Practice Association (1/18/90)	Speech	$1,000	
	PacifiCare Health Systems (1/18/90)	Speech	$1,500	
	Electronic Industries Association (2/21/90)	Speech	$1,000	
	US Telephone Association (1/31/90)	Panel	$1,000	X
	National Cable Television Assoc. (2/21/90)	Panel	$1,500	X
	American Meat Institute (3/23/90)	Speech	$1,500	X
	National Association of Broadcasters (2/21/90)	Panel	$2,000	X
	Grocery Manufacturers of America (3/22/90)	Speech	$2,000	X

For additional earned income, use next page

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Reporting Individual's Name

Bill Richardson

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Western States Water & Power Consumers Conf. (3/14/90)	Speech	$1,500	
American Podiatric Medical Association (3/23/90)	Speech	$2,000	
Interstate Natural Gas Assoc. of America (4/5/90)	Speech	$2,000	
National Assoc. of Broadcasters (4/20/90)	Speech	$2,000	X
Turner Broadcasting System Inc. (4/18/90)	Speech	$500	X
Los Angeles Times (4/3/90)	Article	$250	X
Smokeless Tobacco Council (4/5/90)	Speech	$2,000	X
National Agricultural Chemicals Assoc. (4/19/90)	Speech	$1,500	X
Princeton University (6/18/90)	Speech/panel	$400	
International Chiropractors Assoc. (6/12/90)	Speech	$1,500	
College of American Pathologists (5/17/90)	Speech	$1,500	
National Independent Energy Producers (5/20/90)	Speech	$2,000	
Center for Strategic & International Studies (6/20/90)	Speech	$500	
Assoc. of Independent Television Stations (7/16/90)	Speech	$500	X
International Power & Energy Conference (7/16/90)	Speech	$1,000	
Distilled Spirits Council of US (7/27/90)	Speech	$1,000	
American Physical Therapy Assoc. (7/27/90)	Speech	$2,000	
Pacific Telesis Group (8/23/90)	Speech	$1,000	
Hallmark Cards (9/12/90)	Speech	$2,000	
National Cable Television Assoc. (6/21/90)	Speech	$1,500	X

PART I EARNED INCOME, INCLUDING HONORARIA (Continued)

SOURCE	TYPE	AMOUNT	CHARITY
National Cable TV Association (10/12/90)	Speech	$2,000	X
Bellsouth Inc. (10/26/90)	Speech	$2,000	
National Council of La Raza (10/23/90)	Speech	$1,000	
Pfizer, Inc. (12/21/90)	Speech	$1,000	
National Cable TV Association (12/8/90)	Speech	$400	

Reporting Individual's Name

Bill Richardson

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
JT	Merrill Lynch CMA (Money Market)			X									X									X				
JT	2700 Vista Grande, NW, Albuquerque, New Mexico - condo				X							X								X		X	(gross) (net)			
JT	832 Camino Chaco, Santa Fe, NM House						X					X										X	(gross/net)			

For additional assets and unearned income, use next page

3726

Reporting Individual's Name

Bill Richardson

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	First Interstate Bank of Casper, WY	Mortgage -2700 V. Grande, Alb.NM		X					
JT	Marine Midland Bank, NA	Mortgage -832 C. Chaco, Santa Fe			X				

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Reporting Individual's Name

Bill Richardson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Institute of American Indian Arts	Loan of art for Santa Fe District office	$40,700
Mr. Ford Ruthling	Loan of art for Wash., D.C. Congressional office	$2,000
Mr. Lonnie Sisson	Loan of art for Wash. D.C. office	$10,000
Mr. Ken Blair	Loan of art for Wash. DC office	$2,000

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle. 3 days food & lodging, self and spouse	
PacifiCare Health Systems	1/15/90	1 night hotel & food, Newport Beach, Calif., Self	
Electronic Industries Association	1/6-1/8/90	RT Airfare: DC/Las Vegas/DC; 2 nights hotel & food, Self	
US Telephone Association	1/12-1/13/90	Airfare: DC/Palm Springs, CA, 1 night hotel & food, Self	
National Cable Television Assoc.	1/13-1/15/90	Airfare: Palm Springs/Los Angeles; 2 nights hotel & food, Self	
McGraw-Hill, Inc.	1/24/90	RT Airfare: DC/New Y ork/DC, Self	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

PART VII (continued) Bill Richardson

SOURCE	DATE	DESCRIPTION
American Meat Institute	3/4-3/5/90	Airfare: Albuqurque/Tucson/DC, 1 night hotel & food, Self
National Assoc. of Broadcasters	4/1-4/2/90	Airfare: Albuq/Atlanta/DC, 1 night hotel & food, Self
Princeton University	5/4/90	Train & Airfare: DC/Princeton/DC, Self
American Chamber of Commerce	5/10-5/14/90	Airfare: DC/Santiago, Chile/DC; 3 nights hotel & food, Self, Spouse, 1 Aide
National Cable TV Assoc.	5/20-5/21/90	Airfare: Albuq/Atlanta/DC; 1 night hotel & food, Self
International Power & Energy Conference	6/15-6/16/90	Airfare: Albuq/San Diego/Las Vegas/DC, 1 night hotel, Self
American Physical Therapy Assoc.	6/23-6/24/90,	Airfare: Albuq/Los Angeles/New York, 1 night hotel & food, Self & 1 aide
Hallmark Cards	9/9-9/10/90	Airfare: Albuq/Kansas City/DC, 1 night hotel & food, Self
National Cable Television Assoc.	7/27-7/28/90	Airfare & Train: DC/New York/Albuq. 1 night hotel & food, Self
Caribbean/Central American Action	12/6-12/7/90	Airfare: DC/Miami/DC, 1 night hotel & food, Self
National Cable TV Assoc.	12/8-12/9/90	Train: DC/Atlantic City, NJ; 1 night hotel & food, Self and 1 aide
Pfizer, Inc.	12/9-12/11	Airfare: Atlantic City/Los Angeles/DC, 1 night hotel & food, self; Airfare for 1 aide: Atlantic City/Los Angeles/Albuq., 1 night hotel

Reporting Individual's Name

Bill Richardson

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Member, Board of Visitors	Fletcher School of Law & Diplomacy, Tufts University
Foundation Member	University of the Americas Foundation, Inc.
Board of Overseers for Athletics,	Tufts University

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [ ] NA [X]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Bill Richardson	May 9, 1991

3730

Bill Richardson

PART VIII POSITIONS (Continued)

Positions	Name of Organization
Board Member	Hispanic Japan Institute
Board Member	Hispana Leadership Institute
Board Member	National Assoc. of Latino Elected Officials (NALEO)
Chairman	Hispanic PAC USA

BILL RICHARDSON
3D DISTRICT NEW MEXICO

COMMITTEES
ENERGY AND COMMERCE
INTERIOR AND INSULAR AFFAIRS
HELSINKI COMMISSION
ON HUMAN RIGHTS
SELECT COMMITTEE ON INTELLIGENCE
SELECT COMMITTEE ON AGING

HAND DELIVERED

WASHINGTON
332 CANNON HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-6190

SANTA FE
548 AQUA FRIA
SANTA FE NM 87501
(505) 988-7230

GALLUP
GALLUP CITY HALL
GALLUP NM 87301
(505) 722-8622

LAS VEGAS
SAN MIGUEL COUNTY COURTHOUSE
P O BOX 1806
LAS VEGAS NM 87701
(505) 425-7270

Congress of the United States
House of Representatives
Washington, DC 20515

May 22, 1991

U.S. HOUSE OF REPRESENTATIVES
1991 MAY 23 PM 1:53

MC

1

The Honorable Donnald K. Anderson
Clerk of the House
1036 Longworth House Office Building
Washington, D.C. 20515

Dear Mr. Anderson:

This letter will serve to clarify a question raised in Part IV of my 1990 Financial Disclosure Statement.

In 1989, my wife and I purchased a property at 832 Camino Chaco, in Santa Fe, New Mexico, which we use as our personal district residence. Since it was a personal property which did not generate any income, I did not list it as an asset or transaction on my 1989 Financial Disclosure Statement. However, we did rent out this property in 1990, and it was, therefore, listed on my most recent FD Statement. It was my understanding that a personal residence which does not generate any income need not be reported.

Please let me know if any further documentation is needed.

Sincerely,

Bill Richardson

BILL RICHARDSON
Member of Congress

BR/iw

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:18

TOM RIDGE
(Full Name)

1714 Longworth HOB, Washington, DC 20515
(Mailing Address)

HAND DELIVERED

Filer Status	X Member of the U.S. House of Representatives	State PA District 21	Officer or Employee	Employing Office
Report Type	X Annual (May 15)	Amendment	Termination	Termination Date

mc (Office Use Only) (6)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Public Securities Association (4/29/90)	Speech	$2,000	
	USX (6/20/90)	"	500	
	Fannie Mae (6/29/90)	"	2,000	
	Certified Public Accountant's Assoc. (10/3/90)	"	2,000	
	Pennsylvania Restaurant Assoc. (9/24/90)	"	500	
	National Association of Realtors (11/9/90)	"	2,000	
	Fannie Mae (11/26/90)	"	2,000	
	AT&T (12/17/90)	"	2,000	

For additional earned income, use next page

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Reporting Individual's Name

TOM RIDGE

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	IDS Savings			X									X														Closed Acct.
	IDS Securities			X									X														
	Perpetual Savings Bank		X										X														Closed Acct.
	Federal Credit Union		X										X														
	UpJohn		X								X			X													
	Chrysler		X								X																

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: TOM RIDGE

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Spectrum Control	X																									
	Sovran Bank		X										X					X									

Reporting Individual's Name
TOM RIDGE

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	UpJohn		X		5/15/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
	Marine Bank, Erie, Pennsylvania	West Palm Beach FL-½ interest Prestwick Case #19		X					

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Reporting Individual's Name
TOM RIDGE

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Public Securities Assoc.		4/27-29/90	Two day's food/lodging for self and spouse	
Danny Thompson Memorial Leukemia Fundraising Golf Tournament		8/23-26/90	Air fare from San Diego, CA to Sun Valley, Utah and Sun Valley, UT to Erie, PA/3 day's food/lodging for self and spouse	
Nat'l Assoc. of Realtors		11/8-9/90	R/T air fare from Erie, PA to New Orleans, LA/1 night's lodging and food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
TOM RIDGE

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
NONE	

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
	NONE	

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Thomas J. Ridge	5/15/91

GPO 1991 37-598 (m)

3738

WASHINGTON OFFICE
1714 LONGWORTH BLDG
WASHINGTON, DC 20515
(202) 225-6406

COMMITTEES
BANKING, FINANCE AND URBAN AFFAIRS
VETERANS' AFFAIRS
POST OFFICE AND CIVIL SERVICE

INSIDE MAIL

TOM RIDGE
21st DISTRICT, PENNSYLVANIA

Congress of the United States
House of Representatives
Washington, DC 20515

DISTRICT OFFICES
108 FEDERAL OFFICE BLDG
ERIE, PA 16501
(814) 455-2038

308 CHESTNUT STREET
MEADVILLE, PA 16335
(814) 724-8414

91 EAST STATE STREET
SHARON, PA 16146
(412) 981-8440

June 25, 1991

1

MC

1991 JUN 26 AM 7:36
U.S. HOUSE OF REPRESENTATIVES
RECEIVED

Mr. Donnald K. Anderson
Clerk
Office of Records and Registration
1036 Longworth House Office Bldg.
Washington, DC 20515

Dear Mr. Anderson:

I am writing to request that my Financial Disclosure Statement for 1990 be amended to reflect the following information.

Under Section VI, Section A: Gifts. Round trip air travel from Erie, Pennsylvania to Bali, Indonesia from February 11, 1990 to February 18, 1990 for an American-Vietnamese Dialogue sponsored by The Aspen Institute. This trip also included five day's food and lodging, and all costs incurred were for myself and my wife, Michele.

Your assistance in this matter is greatly appreciated. With thanks and best personal regards, I am

Very truly yours,

Tom Ridge

Tom Ridge
Member of Congress

TR:lf

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

'90 JUN 13 PM 2 09

HAND DELIVERED

MC

(Office Use Only)

8

FRANK DUNCAN RIGGS
(Full Name)

155 Merner Drive
(Mailing Address)

Windsor, California 95492

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Frank & Cathy Riggs, Inc. (dba "Duncan Enterprises")	Salary	$ 50,825.12	
	State of Calif. Job Training Coordinator	Per Diem	800.00	
	Kirk Veale (dba Redwood Hill Real Estate, Inc. Santa Rosa, CA)	Management Incentive	2,556.00	
	Kirk Veale	Spouse Advertising Commission	NA	

For additional earned income, use next page

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Reporting Individual's Name

FRANK D. RIGGS

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X									X					
			182 Main Street, Dover, Delaware				X						X									X						
JT	Properties & option agreements ~~held under Frank & Cathy Riggs,~~ Inc.:																											
JT	1124 Buena Vista Ave. (Spring Valley, CA)						X						X										X					
JT	25% Int. in Haystack Landing ~~Assoc, CA general part.~~ 37 acres, 3355 Petaluma Blvd., ~~S., Petaluma, CA.~~							X					X										X					

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: FRANK D. RIGGS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	50% int. Housing Concepts West option to purchase 7.83 acres																Sale of 50% int.									
	899 & 1005 Gravenstein Hwy., Sebastopol, CA.						X							X			in option						X			X
JT	Contractual right to purchase 7.11 acres 5490 Sonoma Hwy.,						X											X								
JT	Santa Rosa, CA 50% int. in option to purchase																									
	1.16 acres 4970 Carriage Lane, Santa Rosa, CA.				X													X								
JT	2155 Summerfield Rd., .72 acres				X													X								X
JT	Santa Rosa, CA 50% int. Lawrence Vosti - unsecured		X															X								
JT	promissory note Kirk Veale - unsecured			X														X								
JT	promissory note Kovatch Develop. Corp. - real	X												X									X			
JT	estate note paid in full Franchise Rights 0 Dry Clean		X															X								
JT	USA, Windsor, CA. Northern Empire Bancshares -																									
	common stock in Sonoma Nat'l Bank, Santa Rosa, CA.			X														X								
	IRA Shearson Lehman: Insured Pension Investors - 1984		X								X							X								
S	IRA Shearson Lehman: Insured Pension Investors - 1984		X								X							X								

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Reporting Individual's Name

FRANK D. RIGGS

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	50% int. in option to purchase 7.83 acres, 899 & 1005 N. Gravenstein Hwy., Sebastopol, to Gary and Carolyn Mulanix		X		2-28-90		X					
JT	2155 Summerfield Rd., Santa Rosa, CA. 50% int. with Al and Jackie Petrie	X			7-2-90				X			

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	Sonoma Nat'l Bank, Santa Rosa, CA	Business loan (pd off 4/2/90)		X					
JT	Sonoma Nat'l Bank, Santa Rosa, CA	Business credit line (pd off 7/2/90)		X					
JT	Sonoma Nat'l Bank, Santa Rosa, CA	Business loan 6/1/90; pd off 7/2/90		X					
JT	Sonoma Nat'l Bank, Santa Rosa, CA	Mortgage on 2155 Summerfield Rd., Santa Rosa, CA		X					
JT	Home Savings of America	Mortgage on 1124 Buena Vista, Spring Valley, CA			X				

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PART V - LIABILITIES (continued)

JT	M and H Enterprises	Mortgage on 3355 Petaluma Blvd. S, Petaluma, CA	F
JT	Mary Sariotti	Contingent obligation under option to purchase for 5490 Sonoma Hwy., Santa Rosa, CA.	G
JT	Jim and Alice Porsche	Contingent obligation under option to purchase for 4970 Carriage Lane, Santa Rosa, CA.	C
JT	Fred and Alice Garrison and David Durst	Contingent obligation under option to purchase 899 N. Gravenstein Hwy., Sebastopol, CA	F
JT	Martha Mikova and Mary V. Newlund	Contingent obligation under option to purchase 1005 N. Gravenstein Hwy., Sebastopol, CA	E
JT	Thomas & Jean Scally	Contingent obligation under option to purchase 2155 Summerfield Rd., Santa Rosa, CA.	E
JT	Thurman Clement Hall and Mary Rogers Hall	Secured promissory note	C
JT	Christopher K. Flindt	Unsecured personal loan	C

Reporting Individual's Name
FRANK D. RIGGS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
FRANK D. RIGGS

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
President	Frank & Cathy Riggs, Inc., a Calif. Corporation dba "Duncan Enterprises"
Representative	California Job Training Coordinating Council Resigned 1/3/91
Member at Large	California Governor's Committee on Employment of Disabled Persons. Resigned 1/3/91

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Frank D. Riggs	June 13, 1991

GPO 1991 37-598 (m)

Reporting Individual's Name

FRANK D. RIGGS

'ART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
eneral Partner	Haystack Landing Associates, a CA General Partnership
eneral Partner	Housing Concepts West, a CA General Partnership
irector	Habitat for Humanity of Sonoma County, CA. Resigned 1/31/91
irector	Social Advocates for Youth, Santa Rosa, CA. Resigned 1/3/91

FRANK D. RIGGS
1ST DISTRICT, CALIFORNIA

1517 LONGWORTH HOUSE OFFICE BLDG.
WASHINGTON, DC 20515
(202) 225-3311

DISTRICT OFFICES:
777 SONOMA AVENUE, SUITE 329
SANTA ROSA, CA 95404
(707) 576-1466

708 4TH STREET
EUREKA, CA 95501
(707) 445-2055

HAND DELIVERED

Congress of the United States
House of Representatives

COMMITTEE ON PUBLIC WORKS AND TRANSPORTATION
SUBCOMMITTEE ON SURFACE TRANSPORTATION
SUBCOMMITTEE ON WATER RESOURCES

COMMITTEE ON BANKING, FINANCE, AND URBAN AFFAIRS
SUBCOMMITTEE ON HOUSING AND COMMUNITY DEVELOPMENT
SUBCOMMITTEE ON GENERAL OVERSIGHT AND INVESTIGATIONS
SUBCOMMITTEE ON CONSUMER AFFAIRS AND COINAGE

TASK FORCE ON FORESTRY AND FISHERIES
TASK FORCE ON EMPOWERMENT

June 17, 1991

1

MC

1991 JUN 18 AM 11:08

The Honorable Donnald Anderson
Clerk Of The House
U. S. House Of Representatives
H-105, The Capitol
Washington, D. C., 20515

Dear Donn:

Please consider this letter as an amendment to my recently filed Financial Disclosure Statement for Calendar Year 1990.

I inadvertently omitted the following Liability (Part V) which my wife and I incurred on December 28, 1990:

JT Codding Bank, Rohnert Park, CA. Business loan Category D

Thank you for your assistance.

Sincerely,

FRANK RIGGS
Member of Congress

FR:sat

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 3 40

HAND DELIVERED

Matthew J. Rinaldo
(Full Name)

142 Headley Terrace
(Mailing Address)

Union, New Jersey 07083

Filer Status	[X] Member of the U.S. House of Representatives	State N.J. District 7	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

mc (Office Use Only) 11

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Kétchum Communications, Wash. D.C. (1/3/90)	Speech	$250.00	
	National Association of Broadcasters, Wash.D.C. (1/8/90)	Speech	1,500.00	
	American Trucking Association, Wash. D.C. (1/9/90	Speech	1,000.00	
	Association of Maximum Service Telecaster, Inc. Washington, D.C. (1/8/90)	Speech	1,000.00	
	RJR Nabisco, Washington, D.C. (1/8/90)	Speech	2,000.00	
	Tobacco Institute, Wash. D.C. (1/8/90)	Speech	2,000.00	
	Shearson Lehman Hutton, N.Y., N.Y. (1/8/90)	Speech	2,000.00	
	Telecommunications Industry Assn. Chicago, Ill (1/22/90)	Speech	2,000.00	
	U.S. Telephone Association Washington, D.C. (1/25/90)	Speech	2,000.00	
	National Cable Television Associaton Wash. D.C. (1/19/90)	Speech	1,500.00	
	National Association of Broadcasters Washington, D.C. 1/24/90	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name
Matthew J. Rinaldo

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Edison Electric Institute, Washington, D.C. 1/30/90	Speech	$1,000.00	
Chemical Specialties Mfg. Association Washington, D.C. 2/5/90	Speech	500.00	
Barnett Banks, Inc. Jacksonville, Florida 2/9/90	Speech	1,500.00	
Connell Rice & Sugar Co., Inc. Westfield, New Jersey (2/12/90)	Speech	2,000.00	
MCA, Universal City, Ca. (2/27/90)	Speech	2,000.00	
Chicago Mercantile Exchange, Chicago, Ill (3/2/90)	Speech	1,000.00	
Jim Walter Corporation, Tampa, Florida (4/10/90)	Speech	2,000.00	
Home Shopping Network, Clearwater, Fla. (4/9/90)	Speech	2,000.00	
Pfizer, Inc. New York, N.Y. (4/11/90)	Speech	1,000.00	
National Association of Broadcasters Washington, D.C. (4/16/90)	Speech	2,000.00	
AT&T, BAsking Ridge, N.J. (4/16/90)	Speech	2,000.00	
Telecommunications Industry Association Chicago, Il. (4/23/90)	Speech	2,000.00	
Scientific Atlanta, Inc., Atlanta, Ga. (4/27/90)	Speech	2,000.00	
Chicago Board Options Exchange Chicago, Il. (6/11/90)	Speech	1,000.00	
National Cable Television Assn. Washington, D.C. (6/13/90)	Speech	1,500.00	
Distilled Spirits Council (9/12/90)	Speech	2,000.00	
Washington Campus, Inc. Washington, D.C. (10/5/90)	Speech	500.00	
Washington Campus, Inc. Washington, D.C. (10/17/90)	Speech	500.00	
Securities Industry Association Washington, D.C. (11/15/90)	Speech	2,000.00	
Chicago Mercantile Exchange, Chicago, Il. 12/7/90	Speech	750.00	
Chicago Board of Trade, Chicago, Il. (12/10/90)	Speech	750.00	

Matthew J. Rinaldo

PART 1 - EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet A -1 (b)

Total Honoraria $47,250

Total paid to charity $20,403

Reporting Individual's Name

Matthew J. Rinaldo

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Condominium, 500 S. Ocean Blvd. Boca Raton, Fla					X						X										X					
	Town House Condominium, 955 S. Springfield Ave. Springfield NJ					X						X										X					
	Bond - Atlantic Cty			X									X						X								X
	Bond - Ridgewood		X										X						X								X
	Bond - Kearny			X									X								X						X
	Bond - Township of Lower			X									X								X						X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Matthew J. Rinaldo

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Bond - Paulsboro			X									X							X							X
	Bond - Vernon BOE			X									X							X							X
	Stock, Center Bancorp		X								X										X						X
	Bond - N.J. Econ. Dev. Maher		X										X							X							
	Bond - Howell			X									X							X							
	Bond - Caldwell			X									X							X							
	Bond - Wayne			X									X						X								
	Bond - Clayton			X									X							X							
	Bond - Gloucester			X									X						X								
	Bond - Highlands			X									X							X							
	Bond - N.J. Econ. Dev. Manhattan			X									X							X							
	Stock - Detroit Edison			X							X								X								
	Stock - Florida Power & Light			X							X									X							
	Stock - Center Bancorp			X							X										X						
	Keogh - Strong Short Term Bond Fund		X										X						X								

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Matthew J. Rinaldo

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Mutual Fund - Evergreen Total Return Fund			X							X									X							
	Congressional FCU - account		X										X						X								
	Perpetual Savings - account			X									X							X							
	Union Center National Bank - Ac			X									X						X								
	Bond - Jersey City			X								X								X							
	Bond - Morris Hills			X									X							X							
	Bond - N.J. H/C/F Muhlenberg		X										X						X								
	Bond - N.J. H/C/F Muhlenberg		..	X									X							X							
	Bond - Warren Township		x										X						X								
	Tax Free M/M - ShearsonLehman			X									X								X						
	Perpetual Savings - account		X										X					X									
	IRA - Lindner Dividend Fund			X							X									X							
	Keogh - Colonial Savings		X										X						X								
	Keogh - First Fidelity Treasury note			X									X						X								
	Keogh - Mass. Financial Bond Fund			X									X							X							

Reporting Individual's Name
Matthew J. Rinaldo

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Bond - Atlantic Cty		X		3/ 1/90		X					
	Bond - Ridgewood		X		7/1/90	X						
	Bond - Kearny		X		11/7/90		X					
	Bond - Township of Lower		X		9/26/90		X					
	Bond - Paulsboro		X		12/1/90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	None								

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Reporting Individual's Name: Matthew J. Rinaldo

PART IV—TRANSACTIONS - CONTINUATION SHEET

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Bond - Vernon BOE		X		8/15/90		X					
	Stock - Center Bancorp		X		12/19/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name

Matthew J. Rinaldo

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section); aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Edison Electric Institute	1/4-6/90	Roundtrip air travel from Wash. D.C. to Naples, Fla. two days food and lodging	
National Assn. of Broadcasters	1/11/90	one way transportation Newark, N.J. to Palm Springs, Ca.	
U.S. Telephone Assn.	1/11/90	one day food and lodging, Palm Springs, CA	
National Cable Tele. Assn.	1/12/90	one way air transportation from Palm Springs, CA. to Los Angeles, Ca. to Washington, 1 night food & lodging	
Tobacco Institute	1/18-19	Roundtrip air travel from Newark, N.J. to Palm Springs, Ca. one day food and lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Matthew J. Rinaldo

A-4 Continuation Sheet

Source	Dates	Description
The Congressional Institute	2/22-24/90	Two days food and lodging
Futures Industry Assn	3/8-9/90	Air travel Washington, D.C. to Fort Lauderdale, Fla. to Newark, N.J. one day food and lodging
National Association of Broadcasters	4/1-2/90	Air travel Newark, N.J. to Atlanta, Ga. to washington, D.C., one day food and lodging
Home Shopping Network	4/11-12/90	One way transportation, Newark, N.J. to Tampa, Fla, to West Palm Beach, Fla. one day food and lodging
Telecommunications Industry Assn	4/16/90	Air travel from Fort Lauderdale, Fla. to Atlanta, Ga. to Newark, one day food and lodging
National Cable Television Assn.	5/20-21/90	Air travel from Newark, N.J. to Atlanta Ga. to Washington, D.C. one day food and lodging
Browning Ferris Industries	11/18-19/90	Air Travel from Newark, N.J. to Dallas, Texas to Houston, Texas to Washington, D.C. - one day food and lodging
Securities Industries Assn.	11/28-12/1/90	Air travel from Washington, D.C. to West Palm Beach, Fla. three days food and lodging
Chicago Mercantile Exchange	12/10/90	Air travel from Washington, D.C. to Chicago, Il. and return
Florida Power & Light Group	12/27-31/90	Air travel from Washington, D.C. to West Palm Beach, Fla. to Newark

Reporting Individual's Name
Matthew J. Rinaldo

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Director	Watergate South Cooperative Association (uncompensated)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Matthew J. Rinaldo	May 14, 1991

GPO 1991 37-598 (m)

MATTHEW J. RINALDO
7TH DISTRICT, NEW JERSEY

WASHINGTON OFFICE:
2469 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5361

DISTRICT OFFICE:
1961 MORRIS AVENUE
UNION, NJ 07083
(908) 687-4235

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEES:
ENERGY AND COMMERCE
SUBCOMMITTEES:
TELECOMMUNICATIONS AND FINANCE
(RANKING MINORITY MEMBER)
TRANSPORTATION AND
HAZARDOUS MATERIALS
SELECT COMMITTEE
ON AGING
(RANKING MINORITY MEMBER)

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U.S. HOUSE OF REPRESENTATIVES

June 12, 1991

1

MC

Office of Records and Registration
1036 Longworth House Office Building
Washington, D.C. 20515

Gentlemen:

I wish to make the following amendment to my Financial Disclosure Statement for calendar year 1990:

On Page A-4, Part VII the following should be added:

Source	Dates	Itinerary
Foreign Policy Institute of Turkey	Aug. 5-10, 1990	Round trip air travel from Washington, D.C. to Ankara, Turkey - five days food and lodging.

Thank you.

Sincerely yours,

Matthew J. Rinaldo

MATTHEW J. RINALDO
Member of Congress

MJR/bb

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

DONALD LAWRENCE RITTER
(Full Name)

2746 FOREST DRIVE
(Mailing Address)

Coopersburg, PA 18036

Filer Status	[X] Member of the U.S. House of Representatives	State PA District 15th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	x
	ABC Corporation	Directors Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	INTV Association of Independent Television Stations, Inc (1/5/90)	Honorarium	$1,000	
	Electronic Industries Association (1/7/90)	Honorarium	$1,000	
	National Association of Broadcasters (1/11/90)	Honorarium	$1,500	
	National Cable Television Association (1/13/90)	Honorarium	$1,500	
	United States Television Association (1/13/90)	Honorarium	$1,000	
	GPU Service Corporation (3/15/90)	Honorarium	$1,000	
	American Hungarian Federation (3/15/90)	Honorarium	$500.	
	University of Pennsylvania (3/24/90)	Honorarium	$2,000	
	American Society of Manufacturing Engineers (3/26/90)	Honorarium	$2,000	
	CASExpo (4/5/90)	Honorarium	$2,000	

For additional earned income, use next page

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Reporting Individual's Name
DONALD L. RITTER

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Council of Scientific Society Presidents (5/9/90)	Honorarium	$250.00	
National Cable Television Association (5/20/90)	Honorarium	$1,500	
Institute of Scrap Recycling Industries (6/5/90)	Honorarium	$1,000	
American Society for Quality Control (10/1/90)	Honorarium	$2,000	
Milliken & Company (7/20/90)	Honorarium	$2,000	
United States Television Association (11/15/90)	Honorarium	$1,000	
Missouri State College (12/6/90)	Honorarium	$2,000	
Chicago Mercantile Exchange & Chicago Bd. of Trade (7/19/90)	Honorarium	$1,500	
QVC (12/21/90)	Honorarium	$2,000	
Lehigh University	Spouse Salary	N/A	
Lehigh Valley Bank	Director's Fees (Spouse)	$14,225	

Reporting Individual's Name: Donald L. Ritter

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																			Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation.	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S DC JT	Examples	S	ABC Corporation Stock	X								X								X									X
			George Wash. Credit Union Accounts		X									X								X							
			182 Main Street, Dover, Delaware			X							X								X								
	IRA: Lehigh Valley Bank				X									X							X								
S	IRA: Lehigh Valley Bank				X									X							X								
	Annuity, TIAA-CREF: Lehigh Univ.						X							X							X								
S	Annuity, TIAA-CREF: Lehigh Univ.				X									X						X									
S	SRA, Fidelity Investments			X										X															
	National Educ. (Stock)		X									X							X										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: DONALD L. RITTER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Bristol Myers Squibb (stock)	JT			X							X															
Adm. Co. (stock)	JT		X								X															
Conquest Energy Partners Ltd (stock)	JT		X								X															
Schlumberger Ltd. (stock)	JT		X								X															
Syncor Int'l Corp.	JT		X								X															
Transco Energy Co. (stock)	JT		X								X															
York Research Corp. (Stock)	JT		X								X															
SmallCap World Fund (Stock)	JT		X								X															
Harrisburg PA Elec. Rev. (Bond)	JT		X										X													
Piedmont Municip Power Agency (Bond)	JT		X										X													
Polaris Aircraft Inc. (Fund)	JT		X										X					X								
GNMA	DC		X										X						X							
GNMA	DC		X										X						X							
Meridian Bank (CD's)	JT		X										X						X							
Lehigh Valley Bank (CD's)	JT		X										X						X							

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: DONALD L. RITTER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																		BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S DC JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		A none (or less than $201)	B $201 - $1,000	C $1,001 - $2,500	D $2,501 - $5,000	E $5,001 - $15,000	F $15,001 - $50,000	G $50,001 - $100,000	H $100,001 - $1,000,000	I over $1,000,000		
DC Personal Residence Room Rental						X						X										X							

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Reporting Individual's Name: DONALD L. RITTER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Convest Energy Partners, Ltd	X			8/16/90	X						
JT	York Research Corp.	X			8/16/90	X						
JT	Piedmont Municip. Power Agency (Bond)		X		7/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	U.S. Mortgage Corp., Philadelphia, PA	DC Personal Residence			X				

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Reporting Individual's Name
DONALD L. RITTER

PART VI – TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts (other than transportation, lodging, food, or entertainment) disclosed in next Section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $25 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☒

Example	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel-related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information, see Instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	*
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days lodg. & lodging, self and spouse	
Intv Assoc. of Independent TV Stations Inc.		1/4-5/90	Air from Wash. DC. to LA, 2 days, total lodging, self (speech)	
Electronics Industries Assoc.		1/6-7/90	Air from LA to Las Vegas, 2 day, lodging, + food, self and spouse, (panel speaker)	
see next page for more				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individuals Name
Donald L. Ritter

Part VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment
Continuation Sheet

Source	Date	Brief Description (Itinerary and Nature of Expenses)
Nat'l Association of Broadcasters speaker)	1/13-15	Air travel, San Diego-Palm Springs-Allentown, 2 days lodging & meals, self and spouse (Panel
Nat'l Cable Television Association (Congressional Seminar)	1/13	Ground transp. Palm Springs-LA, meals, self and spouse
United States Telephone Association (Leadership Roundtable)	1/12-14	Air travel, Palm Springs-Allentown, meals, 3 days lodging & meals, self and spouse (spouse air travel Allentown-LA)
University of Pennsylvania (Speech)	3/24	Roundtrip ground transp., District-Philadelphia-District, self
American Society of Manufacturing Engineers (Speech)	3/25-26	Air travel, Allentown-LA-Wash., D.C., lodging & meals, self
Nat'l Cable Television Association (Speech)	5/20	Air travel, Allentown-Atlanta-Wash., D.C., meals, self
American Society for Quality Control (Speech)	9/30-10/1	Air travel, Allentown-Atlanta-Wash., D.C., 1 day lodging & meals, self
Milliken & Co. (Speech/Quality Tour)	7/20	Air travel, Wash., D.C.-SC-Allentown, 1 night lodging & meals, self and spouse (spouse travel Allentown-SC-Allentown)
United States Television Association (Leadership Roundtable)	11/11-15	Roundtrip Air, Allentown-Ft. Myers & Naples-Allentown, ground transp., 3 nights lodging & meals, self and spouse, (extra days at own expense)
Missouri State College (Speech)	12/6&7	Air travel, Wash., DC-Joplin, MI-Wash., D.C., 1 night lodging & meals, self
Chicago Mercantile Exchange & Chicago Board of Trade (Speech)	12/18&19	Air travel, Allentown-Chicago-Wash., D.C., 1 night lodging & meals, self
QVC (Speech & Tour)	12/21	Roundtrip ground transp., Coopersburg-Philadelphia-Coopersburg, self

Reporting Individuals Name
Donald L. Ritter

Part VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment
Continuation Sheet

Source	Date	Brief Description (Itinerary and Nature of Expenses)
Non-Honoraria Travel Xerox, 1990 Engineering Systems Division (Speech)	1/3	Roundtrip Air, Allentown-Wash., D.C.-Allentown, self
Ukrainian Congress Committee of America (Speech)	1/21	Roundtrip Air, Allentown-Chicago-Allentown, self
Aspen Institute, American-Vietnamese Dialogue	2/11-18	Roundtrip Air, Allentown-Indonesia-Allentown, 7 days lodging & meals, self and spouse
Electronic Industries Association, LAC Legislative Roundtable (Panelist)	4/9-12	Roundtrip Air, Allentown-Fort Myers-Allentown, 3 nights lodging & meals, self and spouse
TQM (Industry, Government, University) Symposium, (Speech)	7/17&18	Roundtrip Air, Wash., D.C.-Morgantown, WVA-Wash., D.C., 1 night lodging & meals, self
Sixth District (Georgia) Quality Seminar (with Newt Gingrich), (Speech)	8/13-14	1 night lodging & meals, self
IEEE-USA Pace Workshop 1990 Distinguished Public Service Award Recipient	8/31-9/3	Roundtrip Air, Allentown-Phoenix-Allentown, 2 nights lodging & meals, self and spouse

Reporting Individual's Name
DONALD L. RITTER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Bd. of Assoc. / Ex-Officio	Muhlenberg College, Allentown, PA
Bd. of Managers	Bach Choir, Bethlehem, PA
Exec. Committee	L.V. Korea/Vietnam Memorial

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app. 6, §104 and 18 U S.C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Don Ritter	5/14/91

GPO 1991 37-598 (m)

INSIDE MAIL

AMENDED

Reporting Individuals Name
Donald L. Ritter

MC

(4)

Part VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment
Continuation Sheet

Source	Date	Brief Description (Itinerary and Nature of Expenses)
Non Honoraria Travel Xerox, 1990 Engineering Systems Division (Speech)	1/3	Roundtrip Air, Allentown Wash. D.C. Allentown, self
Ukrainian Congress Committee of America (Speech)	1/21	Roundtrip Air, Allentown Chicago Allentown, self
Aspen Institute, American-Vietnamese Dialogue	2/11-18	Roundtrip Air, Allentown-Indonesia Allentown, 7 days lodging & meals, self and spouse
The Congressional Institute, Inc "Congress of Tomorrow", Repubican Leadership Conference	2/22-24	Ground transp, Washington Princeton, 3 nights lodging & meals, self and spouse
Electronic Industries Association, LAC Legislative Roundtable (Panelist)	4/9-12	Roundtrip Air, Allentown-Fort Myers-Allentown, 3 nights lodging & meals, self and spouse
TQM (Industry, Government, University) Symposium, (Speech)	7/17&18	Roundtrip Air Wash., D.C. Morgantown WVA Wash. D.C., 1 night lodging & meals, self
Sixth District (Georgia) Quality Seminar (with Newt Gingrich), (Speech)	8/13-14	1 night lodging & meals, self
IEEE-USA Pace Workshop 1990 Distinguished Public Service Award Recipient	8/31-9/3	Roundtrip Air, Allentown-Phoenix-Allentown, 2 nights lodging & meals, self and spouse

MAY 30 PM 4:26

AMENDED

Reporting Individual's Name: Donald L. Ritter

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Supplemental Retirement Annuity																										
	Fidelity Investments		X										X						X								
JT	Bristol Myers Squibb (stock)			X							X								X								
JT	Archer Daniels Midland (stock)		X								X								X								
JT	Convest Energy Partners LTD (stock)		X								X							X									
JT	Schlumberger Ltd. (stock)		X								X							X									
JT	Syncor Int'l Corp.		X								X							X									
JT	Transco Energy Co. (stock)		X								X							X									
JT	York Research Corp. (stock)		X								X							X									
JT	Smallcap World Fund (stock)		X								X								X								
JT	Harrisburg PA Elec. Rev. (Bond)		X										X						X								
JT	Piedmont Municip. Power Agency (Bond)		X										X						X								
	DC Personal Room Rental (Same as ½ Condo 1989 Report)					X						X										X					

AMENDED

Reporting Individual's Name: DONALD L. RITTER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO., DAY, YR.)	Amount of Transaction: B ($1,001 – $15,000)	C ($15,001 – $50,000)	D ($50,001 – $100,000)	E ($100,001 – $250,000)	F ($250,001 – $500,000)	G ($500,001 – $1,000,000)	H (over $1,000,000)
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Smallcap World Fund	X				X						
S	SRA (Supplemental Retirement Annuity)*											
	*In existence for several years; was not necessary to report in previous years.											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B ($10,001 – $15,000)	C ($15,001 – $50,000)	D ($50,001 – $100,000)	E ($100,001 – $250,000)	F ($250,001 – $500,000)	G ($500,001 – $1,000,000)	H (over $1,000,000)
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name
DONALD L. RITTER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☐ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Don Ritter	5/29/91

GPO 1991 37-598 (m)

3774

(1) ✓ MC Amended

Reporting Individuals Name
Donald L. Ritter

Part VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment
Continuation Sheet

HAND DELIVERED

Source	Date	Brief Description (Itinerary and Nature of Expenses)
Nat'l Association of Broadcasters (Panel speaker)	1/15	Air travel, San Diego-Palm Springs, 1 day lodging & meals, self and spouse
Nat'l Cable Television Association (Congressional Seminar)	1/13	Ground transp. Palm Springs-LA-Palm Springs, meal, self and spouse
United States Telephone Association (Leadership Roundtable)	1/12-14	Air travel, Las Vegas-LA & Palm Springs-Allentown, self. Air travel, Allentown-Las Vegas, LA-Allentown (spouse), meals, 3 days lodging & meals, self and spouse
University of Pennsylvania (Speech)	3/24	Roundtrip ground transp. District-Philadelphia-District, self
American Society of Manufacturing Engineers (Speech)	3/25-26	Air travel, Allentown-LA-Wash. D.C., lodging & meals, self
Nat'l Cable Television Association (Speech)	5/20	Air travel, Allentown-Atlanta-Wash., D.C., meals, self
American Society for Quality Control (Speech)	9/30-10/1	Air travel, Allentown-Atlanta-Wash., D.C., 1 day lodging & meals, self
Milliken & Co. (Speech/Quality Tour)	7/20	Air travel, Wash., D.C.-SC-Allentown, 1 night lodging & meals, self and spouse, spouse travel, Allentown-SC-Allentown.
United States Television Association (Leadership Roundtable)	11/11-15	Roundtrip Air, Allentown-Ft. Myers & Naples-Allentown, ground transp., 3 nights lodging & meals, self and spouse, extra days at own expense
Missouri State College (Speech)	12/6&7	Air travel, Wash., D.C.-Joplin, MI-Wash., D.C., 1 night lodging & meals, self
Chicago Mercantile Exchange & Chicago Board of Trade (Speech)	12/18&19	Air travel, Allentown-Chicago-Wash., D.C., 1 night lodging & meals, self
QVC (Speech & Tour)	12/21	Roundtrip ground transp., Coopersburg-Philadelphia-Coopersburg, self

Continued, Page [illegible] of [illegible]

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:54

HAND DELIVERED

MC (Office Use Only) 8

PAT ROBERTS
(Full Name)

2203 WHITE OAKS DRIVE
ALEXANDRIA, VA. 22306
(Mailing Address)

Filer Status	[X] Member of the U S House of Representatives	State KANSAS District 1	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
SPOUSE		COMMISSION	NA	
HONORARIA:				
FARMLAND INDUSTRIES, K.C. MO. (JAN 5, 1990)		SPEECH	$1,000	
FLORIDA SUGAR CANE LEAGUE, MIAMI, FLA. (JAN 7, 1990)		SPEECH	$2,000	
TOBACCO INSTITUTE, PALM SPRINGS, CALIF. (Jan 20, 1990)		SPEECH	$2,000	
AMERICAN Soybean ASSOC., CRYSTAL CITY, VA. (Jan 22 1990)		SPEECH	$ 250	
DOWELANCO, WASH. D.C. (FEB 7, 1990)		SPEECH	$1,500	
GMA, WASH. D.C. (FEB 9, 1990)		SPEECH	$1,000	
NATL. OILSEED PROCESSORS ASSN, SAN DIEGO, CALIF. (FEB 18 1990)		SPEECH	$1,000	
PHILIP MORRIS, WASH. D.C. (FEB 13, 1990)		SPEECH	$1,000	

For additional earned income, use next page

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Reporting Individual's Name
PAT ROBERTS

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
MILK INDUSTRY FOUNDATION, FT LAUDERDALE, FLA. (Feb. 26, 1990)	Speech	$ 2,000	
MONSANTO, WASH, D.C. (MARCH 28, 1990)	Speech	$ 500	
Congressional Quarterly, WASH. D.C. (June 5, 1990	Speech	$ 900	
International Ice Cream Assn. WASH, D.C. (June 20 1990	Speech	$ 1,000	
National Agric. Chemicals Assn. Wash, D.C. (Aug 2, 1990	Speech	$ 500	
ConAgra, Omaha, Neb. (Sept. 4, 1990)	Speech	$ 2,000	
National Agric. Chemicals Assn., Greenbrier W. VA. (OCT 1 1990)	Speech	$ 1,500	
RJR, Nabisco, Wash. D.C. (Sept. 28, 1990)	Speech	$ 2,000	
Chicago Merc. Exchange, Chicago, Ill. (Nov 11, 1990)	Speech	$ 750	
Chicago Board of Trade, Chicago Ill. (Nov 11, 1990	Speech	$ 750	
Larry Meyers, Exec. Enterprises Inc., Crystal City, VA. (Nov. 30, 1990	Speech	$ 1,000	
Chemical Specialty Manufacturers Assn., Ft. Lauderdale, Fla (Dec 3, 1990)	Speech	$ 500	
Washington Campus Dow Elanco, Wash, D.C. (Dec 11, 1990)	Speech	$ 500	

Reporting Individual's Name
PAT ROBERTS

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, ■ indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples — S	ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X									X					
	182 Main Street, Dover, Delaware				X							X									X						
	RIVER TOWERS Condo., Alex. VA.,				X							X											X				
	J+K Ranch + Realty, Dodge City KS.		X															X									X
	Commercial lot, SUMTER, S.C. 1/5 interest				X													X									
	Perpetual American Savings Bank (Savings)			X									X							X							
	20th Century Mutual Fund		X															X									
	Nuveen Mun. Bond Trust		X															X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: PAT ROBERTS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									Transaction (X)
	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Merrill Lynch Fed. Securities				X							X									X							
Eaton Vance Mutual Fund			X															X									
Phila. Electric			X								X									X							
Ryans Steak House			X															X									
Family Steak House			X															X									
Unit Guaranteed Hotel Inv Trust			X															X									
Hutton UIP Fixed Fund (Shearson-Lehman)			X															X									
Perpetual American Savings Bank (CD)			X										X						X								

Financial Disclosure A-2(a)

Reporting Individual's Name
PAT ROBERTS

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	Alleganoy Bonds		X		5-22-90	X						
	J&K Realty & Ranch (Share purchase)	X			2-15-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Comerica Mortage Co., Detroit Mich.	Mortage on River Towers Condo. Alex. VA.		X					

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Reporting Individual's Name
PAT ROBERTS

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives; gifts of personal hospitality of an individual; and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☒

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
(See ATTACHED SHEET)				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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REIMBURSEMENTS 1990

Florida Sugar Cane League (speaker): Round trip air fare Wash/Miami, FL
Overnight lodging January 5 & 6, 1990 (member & spouse)

Tobacco Institute (speaker): Round trip air fare Wash/Palm Springs, CA
Overnight lodging Jan. 18, 19, & 20, 1990 (member & spouse)

Nat'l Pesticide Information Retrieval System (speaker): Round trip air fare Wash/Orlando, Florida, February 20, 1990 (member only)

Nat'l Oilseed Processors Assn. (speaker): Round trip air fare Wash/San Diego, CA, Overnight lodging Feb. 16, 17, 18, 1990 (member and spouse)

Milk Industry Foundation/Int'l. Ice Cream Assn. (speaker): Round trip air far Wash/Miami, Florida. Overnight lodging February 25 (member only)

Conagra (fact finding): Round trip air fare Wash/Omaha, NE, Sept. 4, 1990 (private plane)

Chicago Mercantile Exchange (fact finding): Round trip air fare Wash/Chicago,IL, Overnight lodging Nov. 11, 1990 (member only)

Chemical Specialties Manufacturers Assn. (speaker): Round trip air fare Wash/Ft. Lauderdale, FL. Overnight lodging Dec. 3, 1990 (member only)

Reporting Individual's Name
PAT ROBERTS

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Vice President	J&K Ranch & Realty Corp., Dodge City, Kansas

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, the receipt of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Pat Roberts	5-15-1991

PAT ROBERTS
1ST DISTRICT, KANSAS

AGRICULTURE COMMITTEE

HOUSE ADMINISTRATION COMMITTEE

Congress of the United States
House of Representatives
Washington, DC 20515

110 LONGWORTH HOUSE OFFICE BUILDING
AREA CODE 202 225-6601
FAX 202 226-5375

LEROY TOWNS
ADMINISTRATIVE ASSISTANT

MERRY W. TOBIN
ADMINISTRATIVE ASSISTANT

June 17, 1991

1

MC

HAND DELIVERED

The Honorable Louis Stokes, chairman
Committee on Standards of Official Conduct
Suite HT-2 U.S. Capitol
Washington, DC 20515
INSIDE MAIL

Dear Mr. Chairman:

I hereby amend my Financial Disclosure Statement for calendar Year 1990 by addition of the following:

Part VI–Tangible Gifts:

1. General Motors Corporation/Public Broadcasting System--Civil War Video Tapes, $395.

This will correct an oversight in the original statement filed May 15.

Sincerely,

Pat Roberts

Pat Roberts

PR/lt

PAT ROBERTS
[illegible] KANSAS
AGRICULTURE COMMITTEE
HOUSE ADMINISTRATION
COMMITTEE

Congress of the United States
House of Representatives
Washington, DC 20515

June 25, 1991

1 ✓ MC

HAND DELIVERED

The Honorable Donnald Anderson
Clerk of the House
Office of Records and Registration
1036 LHOB
Washington, DC 20515
INSIDE MAIL

Dear Mr. Anderson:

I hereby amend my Financial Disclosure Statement for calendar year 1990 as follows:

Part VI--Tangible Gifts

1. General Motors Corporation/Public Broadcasting System--Civil War Video Tapes, $120.

This will correct the value of the tapes as reported in my June 17 letter to the Honorable Louis Stokes, Chairman of the Committee on Standards of Official Conduct.

Sincerely,

Pat Roberts

PR/lt

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Robert A. Roe
(Full Name)

P.O. Box 407
(Mailing Address)

Wayne, NJ 07470

Filer Status	[X] Member of the U.S. House of Representatives	State New Jersey District 8	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MAY 10 1991

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of New Jersey Public Employees Retirement System	Pension	$ 6,752	
	Honoraria (see attached schedule)			

For additional earned income, use next page

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Reporting Individual's Name

Robert A. Roe

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
Jan 12/1990	BASF Corporation 100 Cherry Hill Rd., Parsippany NJ 07054	Speech	$ 2,000	
Feb 20/1990	Ocean Spray Cranberries Inc. Lakeville-Middleboro, MA 02349	Speech	2,000	
Mar 15/1990	American Trucking Associations 2200 Mill Rd., Alexandria, VA 22314	Speech	2,000	
Mar 20/1990	General Atomics P.O. Box 86508, SanDiego, CA 92138	Speech	2,000	
Mar 27/1990	North Texas Commission Box 610246 Dallas/Fort Worth Airport Texas 75261 0246	Speech	2,000	
Apr 4/1990	Lipsen, Whitten & Diamond 1725 De Sales St. N.W., Washinton DC 20036	Speech	1,000	
Apr 9/1990	IISSC International Industrial Symposium on Super Collider 2550 Beckleymeade Avenue Dallas, TX 75237	Speech	2,000	
May 18/1990	Pharmaceutical Manufacturers Assoc. 1100 15th St. N.W., Washington DC 20005	Speech	2,000	
June 19/1990	Shipbuilders Council of America 1110 Vermont Ave. NW, Washington DC 20005	Speech	2,000	
July 24/1990	RJR Nabisco Washington, Inc. 50 New Commerce Blvd., Wilkes Barre, PA 18762	Speech	2,000	
Aug 8/1990	Boeing Company P.O. Box 3999, Seattle, WA 98124	Speech	2,000	
Aug 13/1990	TRW INC. Space & Defense Sector One Space Park, Redondo Beach, CA 90278	Speech	2,000	
Aug 14/1990	Rockwell International El Segundo, CA	Speech	2,000	
Aug 31/1990	Southern Pacific Transportation Co. San Francisco, CA 94105	Speech	2,000	X $650
Aug 7/1990	American Cement Alliance Inc. 1212 New York AVE. N.W., Washington DC 20005	Speech	2,000	X
Aug 16/1990	The Irvine Company 550 Newport Center Dr. Newport Beach, CA 92660	Speech	2,000	X

Reporting Individual's Name

Robert A. Roe

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC JT	S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Ramapo Bank, Wayne, NJ		X										X						X								

For additional assets and unearned income, use next page

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Reporting Individual's Name

Robert A. Roe

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St, Dover, Del.				X			

3789

Reporting Individual's Name: Robert A. Roe

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
General Atomics, San Diego, CA	2/22-26 1990	Roundtrip air fare Washington, DC to San Diego, CA 4 days food and lodging	
International Industrial Symposium on Super Collider	3/15-17 1990	Air fare Washington, DC to Miami, FL 2 days food and lodging	
Dallas, TX 75237			
North Texas Commission Dallas/Fort Worth Airport TX	3/17-19 1990	Air fare Miami, Fl to Dallas, TX; 2 days food and lodging	
Boeing Co., Seattle, WA] TRW Inc. Space & Defense]	8/12-19 1990	Air fare Washington, DC to Seattle, WA; to Los Angeles Ca., to San Francisco, CA to Washington, DC;	

(continued)

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3790

Robert A. Rod

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Sector, Redondo Beach, FL;		]	7 days food and lodging.	
Rockwell Internat'l, El Segundo, CA;		]		
Southern Pacific Transportation Co,		]		
San Francisco, CA.		]		

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Robert A. Roe

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Carol Associates, Wayne, NJ (construction consultants-partnership terminated during 1990
Trustee	Chilton Memorial Hospital, Pompton Plains, NJ
Director	Yanrocorp, Inc., Paterson, NJ (inactive corporation)
Director	Cyrocorp, Inc., Paterson, NJ (inactive corporation)
Director	TaraLand Company, Wayne, NJ (inactive corporation)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
Nov. 1969	State of New Jersey Public Employees Retirement System	Public pension at "normal" retirement age based on employment through November 1969. Payments began March 1, 1984.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☐ NA ☒

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May , 1991

3792

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Honorable Timothy J. Roemer
(Full Name)

Room 415 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

INSIDE MAIL

Filer Status	[X] Member of the U.S. House of Representatives	State Indiana District 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

mc (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Hudson's Department Store - South Bend, Indiana	Spouse Salary	1600.59	

For additional earned income, use next page

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Reporting Individual's Name
Timothy J. Roemer

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X									X					
		182 Main Street, Dover, Delaware				X							X								X							
Condominium 5203 Duke St. #304 - Alex., Va. 22304						X							X										X					

For additional assets and unearned income, use next page

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Reporting Individual's Name
Timothy J. Roemer

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence unless it is rented out. For further information see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Colonial Savings & Loan, Ft. Worth, TX.	mortgage on Condo located at 5203 Blake St, #304 - Alex, VA.			X				

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Reporting Individual's Name
Timothy J. Roemer

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Timothy J. Koerner

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions, page 5.)

Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 5, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or fails to file or knowingly and willfully falsifies or fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001.)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[illegible]	[illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 PM 3:48

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Harold Dallas Rogers
(Full Name)

343 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State KY District 5	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date.

mc (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Citizens National Bank, Somerset, KY	Director	$16,257.67	X ($8,940.)
	National Association of Broadcasters 4/16/90	Honorarium	2,000.00	
	United States Telephone Association 11/29/90	Honorarium	1,000.00	
	The Tobacco Institute 1/08/90	Honorarium	2,000.00	
	National Association of Broadcasters 1/24/90	Honorarium	2,000.00	
	KARE (Klamath Alliance for Resources and Environment) 7/19/90	Honorarium	1,000.00	
	National Coal Association 6/29/90	Honorarium	500.00	
	Tobacco Merchants Association of the United States, Inc. 5/17/90	Honorarium	2,000.00	

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For additional earned income, use next page

Reporting Individual's Name

Harold Dallas Rogers

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Lorillard Tobacco Company 5/8/90	Honorarium	2,000.00	
United States Tobacco Company 9/10/90	Honorarium	2,000.00	
Ashland Oil, Inc. 9/20/90	Honorarium	2,000.00	
National Association of Realtors 10/30/90	Honorarium	2,000.00	
Unites States Telephone Association 02/21/90	Honorarium	1,000.00	

Reporting Individual's Name

Harold Dallas Rogers

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	Examples: George Wash. Credit Union Accounts			X									X									X					
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	First Commerce Bancorp (Holding company for Cumberland Security		X								X							X									
	Bank, formerly Bank of Somerset) Citizens Bancshares (formerly								X			none						X									
	Citizens National Bank)																										
	Citizens National Bank, IRA		X								*Income is not received until retirement.							X									X purchase
S	Citizens National Bank, IRA		X								*Income is not received until retirement.							X									X purchase
	Southern Belle Dairy		X									none						X									

For additional assets and unearned income, use next page

3800

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Harold Dallas Rogers

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S DC JT	Identify each asset and/or income source of yours, your spouse (S) and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Citizens National Bank Account		X										X						X								

3801

Reporting Individual's Name
Harold Dallas Rogers

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	American Capital Government Securities Fund, IRA		X		11/06/90	X						
S	American Capital Emerging Growth Fund, IRA		X		11/06/90	X						
	Citizens National Bank, IRA	X			11/20/90	X						
S	Citizens National Bank, IRA	X			11/20/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	Citizens National Bank of Somerset, KY	Home Mortgage on 309 College St. Somerset, KY		X					
JT	Citicorp Mortgage, Inc. - St. Louis, MO	Home Mortgage on 24 6th St. S.E. Washington, D.C.				X			
JT	Dallas Wood - Alexandria, VA	Home Shared Equity on 24 6th St. S.E., Washington, D.C.		X					

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Reporting Individual's Name
Harold Dallas Rogers

PART VI – TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
	National Association of Broadcasters (1990 Legislative Forum)	Jan. 11-12	Airfare Lexington to Palm Springs, CA Two days food and lodging-self Panel Discussion 1-12-90	
	United States Telephone Association (TELCO Leadership Roundtable)	Jan 13-14	Panel Discussion 1-13-90, Rancho Mirage, CA Two day food and lodging - self	
	Tobacco Institute (Legislative Conference)	Jan 17-20	Three days food and lodging - self, Panel Discussion 1-18-90 Airfare from Palm Springs to Lexington, KY	
	National Association of Broadcasters Annual Convention	Mar. 31 - Apr. 2	Roundtrip airfare: D.C. - Atlanta, Three days food and lodging, self	
	Electronic Industries Association Legislative Affairs Council (Spring Legislative Conference)	Apr. 9-12	Roundtrip Airfare: Lexington-Fort Meyers, Florida four days food and lodging, self & spouse Panel discussion - 4-10-90	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342).

MORE ON BACK

Part VII - Continued

Source	Dates	Brief Description
KARE Klamath Alliance for Resources and Environment	7/13 - 7/16	Roundtrip Airfare: D.C. - Redding, CA, Three days food and lodging, self & son (John), Tour forests, observation of modern forest practices
Danny Thompson Memorial Golf Tournament	8/22 - 8/25	Roundtrip airfare: D.C. - Sun Valley, four days food and lodging, self & spouse, Participant in charity event
National Association of Realtors	11/8 - 11/11	Roundtrip Airfare: Lexington, KY to New Orleans, three days food and lodging, self and spouse, Annual meeting, speeches to Legislative Affairs and Political Affairs Committees 11/9 & 11/10
United States Telephone Association	11/15 - 11/17	Roundtrip airfare: Lexington - Fort Meyers, Florida Three days food and lodging, self & spouse, TELCO Leadership Rountable Discussion 11/16 & 17
Tobacco Merchants Association of the United States, Inc	5/17 - 5/19	Roundtrip transportation (AMTRAK) self & spouse D.C. to New York, speech 5/17
Lorillard Tobacco Company	5/17	One day food and lodging, self and spouse, speech 5/18
Brown & Williamson	5/18	One day food and lodging, self and spouse,

Reporting Individual's Name

Harold Dallas Rogers

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS. Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Director	Citizens National Bank, Somerset, KY
Director	Citizens Bancshares, Inc., Somerset, KY

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [XX] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of your spouse or dependent child because they meet the three tests for exemption? (See Instructions, page 5.)

Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Harold D. Rogers

DATE (Month, Day, Year): May 15, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY -9 PM 3:14
U.S. ... ARCHIVES

HAND DELIVERED

DANA TYRONE ROHRABACHER
(Full Name)

1039 Longworth House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State LA District 42nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	LAFFER & ASSOCIATES (March 19, 1990)	SPEECH	1000	
	Los Angeles Times (March 19, 1990)	ARTICLE	250	
	E.S.O.P. ASSOCIATION (MAY 25, 1990)	SPEECH	2000	

For additional earned income, use next page

3806

Reporting Individual's Name
ROHRABACHER, D

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section II on page A-3. For more details, see instructions, pages 12–14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the margin for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																								Block D
Identify each asset and/or income source of yours your spouse (S) and your dependent child (DC)				Category of Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)								Other Income Specify Type	Category of Amount of Income (X)														Transaction (X)
				A None or less than $1,000	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000			Dividends	Rent	Interest	Capital Gains	Rents and Royalties	Dividends Reinvested				None or less than $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	over $5,000,000		
S DC JT	Examples	S	ABC Corporation Stock		X									X										X														X
			George Wash Credit Union Accounts			X										X										X												
			182 Main Street, Dover Delaware				X								X										X													
	SCE Corp Stock (held in IRA)				X									X										X														
	Dean Witter Liquid Asset Fund (held in IRA)				X									X										X														
	Wright-Patman Fed Cred. Union (CD)			X												X						Interest		X														
	Dana Rohrabacher for Congress (Debt)			X																		Repayment of Campaign Debt						X										
	Dean Witter Liquid Asset Fund			X										X									X															
	W R Grace Stock				X									X									X															

For additional assets and unearned income, use next page

3807

Reporting Individual's Name
ROHRABACHER, D

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			11-12-90			X				
	Wright-Patman Fed Credit Union (C.D.)			X	Matured 5-16-90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

3808

Reporting Individual's Name

Representative D

PART VI – TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description and value of all gifts other than transportation, lodging, food, or entertainment disclosed in next section, aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel-related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly to the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel related expenses provided by federal, state, and local governments, or by a foreign government.* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information, see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Congressional Human Rights Fund		Dec 12-21 1990	Roundtrip air travel including lodgings from Los Angeles to Belize, Belize City, Los Angeles (Gift Excluded); Extra days at own expense	X
Partido Independentista Puertorriqueño		April 22-23 1990	Roundtrip air travel Washington-Miami-Washington, Meals and lodging (Spouse)	X

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3809

Reporting Individual's Name
Rohrabacher, D

PART VIII – POSITIONS

Report the ide[illegible] of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to [illegible]rms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former emp[illegible] other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Dana Rohrabacher	5-9-91

GPO 1991 37-598 (m)

3810

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Y 15 1 08

Ileana Ros-Lehtinen
(Full Name)

416 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

HAND DELIVERED

Filer Status	[X] Member of the U.S. House of Representatives	State Florida District 18	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991 must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. Army Reserve	Spouse Salary	NA	
	U.S. Department of Justice	Spouse Salary	NA	

For additional earned income, use next page

3811

Reporting Individual's Name
Ileana Ros-Lehtinen

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
JT	Professional Savings Bank				X										X						X									
	90 West 11th Street Inc. Stock / Hialeah Florida					X														X										
S	MegaBank Stock Miami, Florida /spouse				X															X										
JT	Community Bank, Homestead Fla. 2 IRA's/CD			X											X					X										
	Florida State Retirement Plan Spouse				X X															X										
	90 West 11th Street Inc.																		Directors Fee					X						

For additional assets and unearned income, use next page

3812

Reporting Individual's Name
Ileana Ros-Lehtinen

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE XX

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE XX

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	NONE								

3813

Reporting Individual's Name
Ileana Ros-Lehtinen

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [XX]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Elephant Forum/Miami, Florida	Feb. 19 1990	Roundtrip Air Travel from Wash. DC to Miami, including lunch, for speech	
Anti-Defamation League of B'nai Brith	Jan. 7-10 1990	Roundtrip Air Travel from Wash. DC to Israel for factfinding, plus lodging and meals	
Cuban American National Foundation	June 2 1990	Roundtrip Air Travel from Miami to Los Angeles for speech. Same day travel	
Catholic Community Services	March 19 1990	Air/Train Travel from Miami to Newark, NJ, for speech, return to Washington. Same day travel	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Ileana Ros-Lehtinen

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Director	90 West 11th Street, Inc.

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

Please also refer to disclosure of spouse, Dexter W. Lehtinen, if needed.

SIGNATURE OF REPORTING INDIVIDUAL: Ileana Ros-Lehtinen

DATE (Month, Day, Year): May 15, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 2:45

HAND DELIVERED

Charles Grandison Rose, III
(Full Name)

2230 Rayburn
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: NC District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) (8)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute (January 18, 1990)	Honorarium	$ 2,000	
	RJR Nabisco (January 17, 1990)	Honorarium	$ 2,000	
	Arkansas Poultry Federation (February 23, 1990)	Honorarium	$ 2,000	
	American Medical Association (February 26, 1990)	Honorarium	$ 2,000	
	FOSE (March 21, 1990)	Honorarium	$ 2,000	
	Con Agra, Inc. (April 23, 1990)	Honorarium	$ 2,000	
	Smokeless Tobacco (May 17, 1990)	Honorarium	$ 2,000	
	Xerox (June 4, 1990)	Honorarium	$ 1,000	
	McNair Law Firm, P.A. (June 6, 1990)	Honorarium	$ 1,000	
	National Restaurant Association (June 7,1990)	Honorarium	$ 2,000	

For additional earned income, use next page

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Reporting Individual's Name

Charles Grandison Rose, III

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Southeastern Peanut Association (June 18, 1990)	Honorarium	$2,000	
Connell Rice & Sugar (June 25, 1990)	Honorarium	$2,000	
Associated Information Managers/Digital (June 27,1990)	Honorarium	$300	
The Peanut Membership Organization (June 30, 1990)	Honorarium	$1,000	
The Western Peanut Growers Association (June 30, 1990)	Honorarium	$2,000	
Southwestern Peanut Shellers Association (June 30, 1991)	Honorarium	$1,500	
Distilled Spirits Council (September 25, 1990)	Honorarium	$2,000	X
Telecommunications Industries, Inc./MRI (October 10,1990)	Honorarium	$1,000	X
The Beer Institute (November 20, 1990)	Honorarium	$2,000	X
Natl' Agricultural Chemicals Assoc. (December 13, 1990)	Honorarium	$2,000	X (except $50.00)

Reporting Individual's Name

Charles Grandison Rose, III

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
1/2 Interest Bald Head Island, NC condo					X							X										X	(GROSS)				
Cascade Mountain, VA ski lot, 3/4 acre			X															X									
Wright Patman Credit Union				X									X								X						
Wachovia Bank & Trust Accounts				X									X						X								

For additional assets and unearned income, use next page

3818

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: Charles Grandison Rose, III

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1 001)	B $4 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2,501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	Transaction (X)
	N/A																									

Reporting Individual's Name
Charles Grandison Rose, III

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	People's Federal Savings and Loan, Southport, NC	Mortage on Bald Head Island, NC condo				X			

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Reporting Individual's Name
Charles Grandison Rose, III

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
The Tobacco Institute (Speech)		Jan 18-19, 1990	Roundtrip Air from Wash. D.C. to Palm Springs, CA. Two days food & lodging. Self/spouse.	
Arkansas Poultry Federation (Speech)		Feb23,1990	Roundtrip Air from Wash. D.C. to Fayetteville, ARK. One day food & lodging.	
American Medical Association (Speech)		Feb26,1990	Roundtrip Air from Wash. D.C. to Phoenix, AZ. One day food & lodging.	
ConAgra (Speech)		April 23, 1990	Roundtrip Air from Wash. D.C. to Omaha, Neb. (Charter) One day food & lodging.	
Southeastern Peanut Association (Speech)		June 18-19 1990	Roundtrip Air from Wash. D.C. to Ft. Lauderdale, FL Two days food & lodging. Self/Spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3821

Reporting Individual's Name

Charles Grandison Rose, III

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18

NONE [X]

Example:	Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Connell Rice & Sugar (Speech)		June 25, 1990	Roundtrip Air from Wash. D.C. to Newark, NJ.	
Southwestern Peanut Sheller (Speech)		June 30, 1990	Roundtrip Air from Wash. D.C. to San Antonio, TX. 1 day food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

38822

Reporting Individual's Name

Charles Grandison Rose, III

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Honorary Chairman	The Cape Fear Charitable Foundation

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Charles G. Rose III	May 15, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 MAY 20 AM 10:01
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MAY 15 1991
MC (10)
(Office Use Only)

Dan Rostenkowski
(Full Name)

2111 Rayburn H. O. B.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Illinois District: 8	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	see attached - Statement #1			

For additional earned income, use next page

3824

Reporting Individual's Name

Dan Rostenkowski

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
	see attached - Statement #2																											

For additional assets and unearned income, use next page

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Reporting Individual's Name
Dan Rostenkowski

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	see attached - Statement #3											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

3826

Reporting Individual's Name
Dan Rostenkowski

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
see attached - Statement #4		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
see attached - Statement #5				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
Dan Rostenkowski

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [X] No [ ] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Dan Rostenkowski	May 15, 1991

GPO 1991 37-598 (m)

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DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #1

SOURCE (INCLUDES DATE OF RECEIPT FOR HONORARIA)	TYPE	AMOUNT	"X" IF PAID TO CHARITY
AAllied Die Casting & Mfg. Co., Inc. - 5/11/90	Honorarium	$500.	x
Brown Brothers Harriman & Co. - 4/24/90	Honorarium	$7,500.	x
Council for Advancement & Support of Education - 7/16/90	Honorarium	$2,000.	x
U. S. F. & G. - 12/18/90	Honorarium	$2,000.	x
The Tobacco Institute - 1/19/90	Honorarium	$2,000.	
Public Securities Association - 10/19/90	Honorarium	$7,500.	x
Citicorp/Citibank - 9/17/90	Honorarium	$7,500.	x
American Hospital Association - 2/22/90	Honorarium	$7,500.	x
Pfizer, Inc. - 2/22/90	Honorarium	$2,000.	
Glaxo, Inc. - 3/26/90	Honorarium	$2,000.	x
Pharmaceutical Manufacturers Assoc - 3/09/90	Honorarium	$2,000.	x
Desert Hospital - 3/30/90	Honorarium	$7,500.	x
Callen Manufacturing Corp. - 4/20/90	Honorarium	$500.	x
NAIOP Political Development Fund - 3/2/90	Honorarium	$2,000.	
Eden Financial Group - 4/18/90	Honorarium	$7,500.	x
North American Die Casting Assoc. - 5/25/90	Honorarium	$3,000.	x
The Equitable Life Assurance Co. of the US - 3/9/90	Honorarium	$2,000.	
Ernst & Young - 4/13/90	Honorarium	$7,500.	x
Futures Industry Association - 5/16/90	Honorarium	$7,500.	x
Amer. Assoc. of Advertising Agencies - 3/27/90	Honorarium	$7,500.	x
Cansco Die Casting - 5/11/90	Honorarium	$500.	x
National Association of Broadcasters - 2/2/90	Honorarium	$5,500.	x
Robert A. Zach - 5/15/90	Honorarium	$500.	x
General Electric - 3/6/90	Honorarium	$2,000.	
American Academy of Actuaries - 10/2/90	Honorarium	$7,500.	x
Nat'l. Assoc. of Chain Drug Stores, Inc. - 5/4/90	Honorarium	$7,500.	x
The Harry Walker Agency, Inc. (Merrill Lynch) - 3/20/90	Honorarium	$2,000.	
Invest to Compete Alliance - 4/24/90	Honorarium	$7,500.	x
Shipbuilders Council of America - 9/20/90	Honorarium	$7,500.	x
American Society of Assoc. Executives - 8/13/90	Honorarium	$7,500.	x
Nat'l. Venture Capital Assoc. - 6/4/90	Honorarium	$7,500.	x
Vern Clark & Assoc. - 1/17/90	Honorarium	$2,000.	
Philip Morris Management Corp. - 6/1/90	Honorarium	$2,000.	x
The Harry Walker Agency,Inc.(Merrill Lynch)-3/29/90	Honorarium	$12,000.	x
F.E.I.1990 Conference E.Irminger-Centel. Corp.-6/21/90	Honorarium	$7,500.	x
Health Care & Cost Management, Inc. - 3/30/90	Honorarium	$7,500.	x
Hotel & Restaurant Employees Int'l Union - 1/25/90	Honorarium	$2,000.	
Arthur Andersen & Co. - 6/22/90	Honorarium	$7,500.	x
Eli Lilly & Co. - 3/13/90	Honorarium	$2,000.	x
CL Global Partners Securities Corp. - 5/16/90	Honorarium	$7,500.	x
The Elizabeth Gamble Deaconess Home Association - 9/13/90	Honorarium	$7,500.	x
American Internat'l. Automobile Dealers Assoc. - 6/5/90	Honorarium	$7,500.	x
The Lincoln National Life Insurance Company - 2/8/90	Honorarium	$5,500.	x
Steel Service Center Institute - 5/10/90	Honorarium	$1,850.	
National Soft Drink Association - 10/10/90	Honorarium	$7,500.	x
National Association of Homebuilders - 3/2/90	Honorarium	$5,500.	x
American Stock Exchange, Inc. (AMEX) - 11/7/90	Honorarium	$7,500.	x
RJR Nabisco Washington, Inc. - 8/27/90	Honorarium	$7,500.	x
National Assoc. of Broadcasters - 2/2/90	Honorarium	$2,000.	
North American Die Casting Assoc. - 5/10/90	Honorarium	$2,500.	x
NAIOP Political Development Fund - 3/2/90	Honorarium	$2,000.	x
Mid-Continent Oil & Gas Association - 3/15/90	Honorarium	$2,500.	x
The Washington Discussion Group - 10/1/90	Honorarium	$2,000.	x
Steel Service Center Institute - 5/10/90	Honorarium	$1,500.	x
The Lincoln National Life Insurance Company - 2/8/90	Honorarium	$2,000.	
The Urban Land Institute - 11/8/90	Honorarium	$7,500.	x
Assoc. of Foreign Investors in U.S. Real Estate - 11/14/90	Honorarium	$7,500.	x
National Association of Homebuilders - 3/2/90	Honorarium	$2,000.	
Assoc. of American Medical Colleges - 5/4/90	Honorarium	$2,000.	x
Health Insurance Assoc. of America - 6/1/90	Honorarium	$7,500.	x
Nat'l. Assoc. of Real Estate Investment Trusts-5/7/90	Honorarium	$7,500.	x
Bldg & Const. Trades Dept.-AFL-CIO - 1/15/90	Honorarium	$2,000.	
Chicago Research & Trading Group, Ltd. - 6/18/90	Honorarium	$7,500.	x
Aldrich, Eastman & Waltch, Inc. - 2/22/90	Honorarium	$7,500.	x
Wine & Spirits Wholesalers of America, Inc. - 4/25/90	Honorarium	$1,000.	
Steel Service Center Institute - 5/10/90	Honorarium	$150.	x
Confidence Insurance Agency	Spouse Salary	n/a	

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #2

BLOCK A	BLOCK B	BLOCK C	BLOCK D
S-Blackstone Advantage Term Trust	B	Dividend-I	X
S-Boatmens Bancshares Inc.	A*	Dividend-II	X
S-Boeing Co.	C	Dividend-II	X
S-Borden Chem. & Plastic Ltd. Partnership	A*	Partnership Dist.-II	X
S-CAT Natl. Money Market Fund	C	Dividend-IV	
S-Ford Motor Co. Del.	A*		X
S-Giddings & Lewis Dis.	A*		X
S-Helene Curtis Industries, Inc.	B	Dividend-I	
Athlone, Inc.	C	Dividend-IV	
Deluxe Corporation	D	Dividend-III	
Qualified Blind Trust	n/a	Qualified Blind Trust-VI	
S-BP Prudhoe Bay Royalty Trust Units	B	Royalty-II	
S-Willamette Ind. Inc.	A*		X
S-Waste Management Inc.	C	Dividend-I	X
Egyptian Trotting Association Stock	B		
GSE Laboratories Stock	A		
Equity Ownership in Ridgemoor CC	B		
S-UNC, Inc.	A*		X
S-Tokheim Corp.	A*		X
S-TJX Co., Inc.	A*		X
S-TRW Inc.	A*		X
S-Service Master Limited Partnership	A*	Partnership Dist.-I	X
S-Prudential Bache MultiSector Fund Class B	B	Dividend-II	X
S-Omnicom Group, Inc.	A*	Dividend-I	X
S-Norfolk Southern Corp.	A*		X
S-Morgan J P & Co., Inc.	A*	Dividend-I	X
S-Midway Airlines Inc. Cum. Prfd. Series D	B	Dividend-II	X
S-McDonalds Corp.	B	Dividend-I	
S-Leslie Fay Co. Inc.	A*		X
S-International Business Machines	A*		X
S-Security Federal Savings & Loan	D	Interest-IV	X
S-Northwestern Savings & Loan	D	Interest-IV	
National Security Bank	B	Interest-V	
S-First Natl. Bank of Chicago (IRA)	B	Interest-II	
S-American Natl. Bank (IRA)	C	Interest-II	
First Natl. Bank of Chicago (IRA)	B	Interest-II	
American Natl. Bank (IRA)	C	Interest-II	
Blackstone Advantage Term Trust**	C	Dividend-III	X
CAT Natl. Money Market Fund**	A*	Dividend-V	
CAT Natl. Government Fund **	E	Dividend-III	
Eastman Kodak Co.**	C	Interest-III	X
Midway Airlines Inc. Cum. Prfd. Series D**	B	Dividend-II	X
Prudential Bache MultiSector Fund Cl.B**	C	Dividend-II	X
Sears Credit Cards Series 1990 B**	C	Interest-III	X
CD Sears Savings Bank**	C	Interest-III	X
CD San Jacinto**	A*	Interest-II	X
CD Atlantic Fin.**	A*	Interest-II	X
East New York Savings Bank	C	Interest-III	
Net Tenant Income - Rental Property, located at Evergreen & Noble Streets, Chicago, Illinois	D	Rental-II	
1/3 Interest in Lot #26, Unit 6,ID#36-24 -16-0010-5800-0000, Pasco Cty,FL	B		
Hernando County, Block Unit 20, Lots7-14, Spring Hills, FL	D		
Collier County, #49801200002, Marco Island, FL	C		
2158 N. Damen Ave., Chicago, IL	C		
NE Corner Blackhawk & Noble Sts., Chicago, IL	B		
1362 W. Evergreen; Chicago, IL	B		
Corner of Ada & Evergreen, Chicago, IL	B		
Corner of Haddon & Noble St., Chicago,IL	B		

* Indicates all shares of stock were sold or ending balance in account was zero on 12/31/90
** Indicates activity in Prudential Bache (KEOGH)

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #3

IDENTIFICATION OF ASSETS	TYPE OF TRANSACTION/DATE	AMOUNT
S-Blackstone Advantage Term Trust	Purchase - 4/27/90	B
S-Blackstone Advantage Term Trust	Sale - 8/31/90	B
S-Boatmens Bancshares Inc.	Sale - 8/31/90	B
S-Boeing Co.	Purchase - 5/22/90	C
S-Borden Chem. & Plastic Ltd. Partnership	Sale - 5/22/90	B
S-Ford Motor Co. Del.	Sale - 1/22/90	B
S-Giddings & Lewis Dis.	Sale - 1/22/90	B
S-Leslie Fay Co. Inc.	Sale - 9/13/90	B
S-International Business Machines	Sale - 1/22/90	B
S-Midway Airlines Inc. Cum. Prfd. Series D	Purchase - 4/26/90	B
S-Midway Airlines Inc. Cum. Prfd. Series D	Sale - 9/13/90	B
S-Prudential Bache MultiSector Fund Class B	Purchase - 6/29/90	B
S-Omnicom Group, Inc.	Sale - 1/22/90	B
S-Norfolk Southern Corp.	Sale - 1/22/90	B
S-Morgan J P & Co., Inc.	Sale - 8/31/90	B
S-UNC, Inc.	Sale - 1/22/90	B
S-Tokheim Corp.	Sale - 1/22/90	B
S-TJX Co., Inc.	Sale - 1/22/90	B
S-TRW Inc.	Sale - 1/22/90	B
S-Service Master Limited Partnership	Sale - 8/31/90	B
S-Willamette Ind. Inc.	Sale - 1/22/90	B
S-Waste Management Inc.	Purchase - 8/17/90	B
S-Waste Management Inc.	Purchase - 10/26/90	B
Blackstone Advantage Term Trust**	Purchase - 4/27/90	C
Eastman Kodak Co.**	Purchase - 1/22/90	C
Midway Airlines Inc. Cum. Prfd. Ser.D **	Purchase - 4/26/90	C
Prudential Bache MultiSector Fund Cl.B**	Purchase - 6/29/90	C
Sears Credit Cards Series 1990 B**	Purchase - 3/1/90	C
CD Sears Savings Bank**	Purchase - 5/16/90	C
CD San Jacinto**	Purchase - 9/26/90	D
CD Atlantic Fin.**	Purchase - 8/08/90	D
CD San Jacinto**	Sale - 10/26/90	D
CD Atlantic Fin.**	Sale - 09/07/90	D
S-Security Federal Savings & Loan	Deposit Inheritance-8/6/90	C

** Indicates activity in Prudential Bache (KEOGH)

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #4

SOURCE	DATES	BRIEF DESCRIPTION
GIFT		
American Association of Advertising Agencies (speech)	3/16-17/90	- 1 day lodging & meals travel: Chgo/Palm Springs/Chgo
American Association of Association Execs. (speech)	7/30/90	- travel: Chgo/DC
American Hospital Assn.(speech)	1/29/90	- travel: Chgo/DC/Chgo
Association of American Medical Colleges (speech)	5/10/90	- 1 day lodging & meals travel: DC/Boston/NY
AT & T Pebble Beach Pro Am (Charity Golf Tournament)	1/31-2/4/90	- 4 days lodging & meals travel: DC/Monterrey/DC
Business Roundtable (speech)	4/2-3/90	- 1 day lodging travel: NJ/NY/DC
Business Roundtable (speech)	12/17/90	- travel: Chgo/NY/DC
Chicago Research & Trading Group (speech)	6/18/90	- travel: DC/Chgo/DC
Christ Hospital (speech)	9/13/90	- travel: DC/Cincinnati/DC
Citibank (speech)	7/26-27/90	- 1 day lodging & meals travel: DC/NY/Chgo
Committee for Responsible Government (speech)	1/10-12/90 1/6-12/90	- 2 days meals & lodging (1 day for spouse) - travel: Chgo/Hawaii/Maui/Chgo (spouse also)
Danny Thompson Memorial (Charity Golf Tournament)	8/23-25/90	- 3 days lodging & meals travel Chgo/Idaho/Chgo
Dean Witter (speech)	5/14/90	- travel: Chgo/Dublin, OH/Chgo
Desert Hospital (speech)	2/21-22/90	- 2 days lodging & meals
Eden Financial Group (speech)	4/24/90	- travel: Chgo/DC
Financial Executives Institute (speech)	10/1/90	- travel: DC/Chgo/DC
Futures Industry Assn. (speech)	3/8-11/90	- 3 days meals & lodging travel: DC/W.Palm Beach/Chgo
Helene Curtis Corp. (speech)	2/25-26/90	- 1 day lodging & meals travel: Palm Springs/Maui/DC
Bob Hope Chrysler Classic (Charity Golf Tournament)	1/14-20/90	- travel: Chgo/Palm Springs/Chgo & ground transportation (spouse also)
Hotel, Restaurant Employees International Union (speech)	1/6-9/90	- 4 days meals & lodging (Hawaii) (spouse also)
Lincoln Natl. Corp.(speech)	4/1-2/90	- 1 day lodging & meals travel: DC/Scottsdale/NJ
Merrill Lynch (speech)	3/1-4/90	- 3 days lodging & meals travel: DC/Palm Springs/DC
National Association of Homebuilders (speech)	3/5/90	- travel: Chgo/DC/Chgo
Natl. Association of Real Estate Invest. Trust (speech)	5/25/90	- travel: DC/Chgo/DC
National Chain Druggists Association (speech)	4/22-23/90	- 1 day lodging & meals travel: DC/Palm Beach/Chgo
Nevada Resort Assn. (speech)	12/27-29/90	- 2 days lodging & meals (spouse also) travel: Chgo/Las Vegas/Chgo (spouse also)
Pacific Telesis Group (speech)	6/21-24/90	- travel: Chgo/San Francisco/Chgo (spouse also)
J. C. Penney (Charity Golf Tournament)	11/26-29/90	- 3 days lodging & meals travel: Chgo/Tampa/DC
Pharmaceutical Manufacturers Association (speech)	2/15-17/90	- 2 days lodging & meals travel: Chgo/Scottsdale/Chgo
Philip Morris (speech)	2/17-20/90	- 4 days lodging & meals travel: Chgo/Palm Beach/Palm Springs
Public Securities Assn.(speech)	10/27/90	- travel: DC/Boca Raton/Chgo
RJR Nabisco (speech)	8/14-15/90	- 1 day lodging & meals travel: Chgo/Colorado/Chgo
Shipbuilders Council of America (speech)	9/14/90	- travel: DC/Chgo/DC
Frank Sinatra Pro Am (Charity Golf Tournament)	2/23-24/90	- 2 days meals
U.S.F.& G. (speech)	11/23-26/90	- 3 days lodging & meals (spouse also) travel: Chgo/Palm Springs/Chgo (spouse also)
Volunteers of America (speech)	5/9/90	- travel: Chgo/DC

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #5

SOURCE	BRIEF DESCRIPTION	VALUE
Bob Hope Chrysler Classic	Golf Clothing & Accessories	under $200
A T & T Pebble Beach Pro Am	Golf Clothing & Accessories	under $200
Kemper Pro-Am	Golf Clothing & Accessories	under $200
Danny Thompson Memorial Golf Tournament	Golf Clothing & Accessories	under $200
J. C. Penney Tournament	Golf Clothing & Accessories	under $200

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 22 AM 7:38

Dan Rostenkowski
(Full Name)

2111 Rayburn H. O. B.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State Illinois District 8	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MAY 16 1991
(Office Use Only)

10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
see attached - Statement #1			

For additional earned income, use next page

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Reporting Individual's Name

Dan Rostenkowski

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset – Category of Value (X)									BLOCK C Income – Type of Income (X)							Category of Amount of Income (X)									Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST*	CAPITAL GAINS	EXCEPTED TRUST*	QUALIFIED BLIND TRUST*	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	see attached - Statement #2																											

*For additional assets and unearned income, use next page

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Reporting Individual's Name
Dan Rostenkowski

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	see attached - Statement #3											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name
Dan Rostenkowski

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4 limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
see attached - Statement #4		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel related expenses provided by federal, state, and local governments, or by a foreign government.* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information, see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	* Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
see attached - Statement #5			

*Designed to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
Dan Rostenkowski

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [X] No [ ] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C app. 6, §104 and 18 U S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Dan Rostenkowski

DATE (Month, Day, Year): May 15, 1991

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #1

SOURCE (INCLUDES DATE OF RECEIPT FOR HONORARIA)	TYPE	AMOUNT	"X" IF PAID TO CHARITY
AAllied Die Casting & Mfg. Co., Inc. - 5/11/90	Honorarium	$500.	x
Brown Brothers Harriman & Co. - 4/24/90	Honorarium	$7,500.	x
Council for Advancement & Support of Education - 7/16/90	Honorarium	$2,000.	x
U. S. F. & G. - 12/18/90	Honorarium	$2,000.	x
The Tobacco Institute - 1/19/90	Honorarium	$2,000.	
Public Securities Association - 10/19/90	Honorarium	$7,500.	x
Citicorp/Citibank - 9/17/90	Honorarium	$7,500.	x
American Hospital Association - 2/22/90	Honorarium	$7,500.	x
Pfizer, Inc. - 2/22/90	Honorarium	$2,000.	
Glaxo, Inc. - 3/26/90	Honorarium	$2,000.	x
Pharmaceutical Manufacturers Assoc - 3/09/90	Honorarium	$2,000.	x
Desert Hospital - 3/30/90	Honorarium	$7,500.	x
Callen Manufacturing Corp. - 4/20/90	Honorarium	$500.	x
NAIOP Political Development Fund - 3/2/90	Honorarium	$2,000.	
Eden Financial Group - 4/18/90	Honorarium	$7,500.	x
North American Die Casting Assoc. - 5/25/90	Honorarium	$3,000.	x
The Equitable Life Assurance Co. of the US - 3/9/90	Honorarium	$2,000.	
Ernst & Young - 4/13/90	Honorarium	$7,500.	x
Futures Industry Association - 5/16/90	Honorarium	$7,500.	x
Amer. Assoc. of Advertising Agencies - 3/27/90	Honorarium	$7,500.	x
Lansco Die Casting - 5/11/90	Honorarium	$500.	x
National Association of Broadcasters - 2/2/90	Honorarium	$5,500.	x
Robert A. Zach - 5/15/90	Honorarium	$500.	x
General Electric - 3/6/90	Honorarium	$2,000.	
American Academy of Actuaries - 10/2/90	Honorarium	$7,500.	x
Nat'l. Assoc. of Chain Drug Stores, Inc. - 5/4/90	Honorarium	$7,500.	x
The Harry Walker Agency, Inc. (Merrill Lynch) - 3/20/90	Honorarium	$2,000.	
Invest to Compete Alliance - 4/24/90	Honorarium	$7,500.	x
Shipbuilders Council of America - 9/20/90	Honorarium	$7,500.	x
American Society of Assoc. Executives - 8/13/90	Honorarium	$7,500.	x
Nat'l. Venture Capital Assoc. - 6/4/90	Honorarium	$7,500.	x
Vern Clark & Assoc. - 1/17/90	Honorarium	$2,000.	
Philip Morris Management Corp. - 6/1/90	Honorarium	$2,000.	x
The Harry Walker Agency,Inc.(Merrill Lynch)-3/29/90	Honorarium	$12,000.	x
F.E.I.1990 Conference E.Irminger-Centel. Corp.-6/21/90	Honorarium	$7,500.	x
Health Care & Cost Management, Inc. - 3/30/90	Honorarium	$7,500.	x
Hotel & Restaurant Employees Int'l Union - 1/25/90	Honorarium	$2,000.	
Arthur Andersen & Co. - 6/22/90	Honorarium	$7,500.	x
Eli Lilly & Co. - 3/13/90	Honorarium	$2,000.	x
CC Global Partners Securities Corp. - 5/16/90	Honorarium	$7,500.	x
The Elizabeth Gamble Deaconess Home Association - 9/13/90	Honorarium	$7,500.	x
American Internat'l. Automobile Dealers Assoc. - 6/5/90	Honorarium	$7,500.	x
The Lincoln National Life Insurance Company - 2/8/90	Honorarium	$5,500.	x
Steel Service Center Institute - 5/10/90	Honorarium	$1,850.	
National Soft Drink Association - 10/10/90	Honorarium	$7,500.	x
National Association of Homebuilders - 3/2/90	Honorarium	$5,500.	x
American Stock Exchange, Inc. (AMEX) - 11/7/90	Honorarium	$7,500.	x
RJR Nabisco Washington, Inc. - 8/27/90	Honorarium	$7,500.	x
National Assoc. of Broadcasters - 2/2/90	Honorarium	$2,000.	
North American Die Casting Assoc. - 5/10/90	Honorarium	$2,500.	x
NAIOP Political Development Fund - 3/2/90	Honorarium	$2,000.	x
Mid-Continent Oil & Gas Association - 3/15/90	Honorarium	$2,500.	x
The Washington Discussion Group - 10/1/90	Honorarium	$2,000.	x
Steel Service Center Institute - 5/10/90	Honorarium	$1,500.	x
The Lincoln National Life Insurance Company - 2/8/90	Honorarium	$2,000.	
The Urban Land Institute - 11/8/90	Honorarium	$7,500.	x
Assoc. of Foreign Investors in U.S. Real Estate - 11/14/90	Honorarium	$7,500.	x
National Association of Homebuilders - 3/2/90	Honorarium	$2,000.	
Assoc. of American Medical Colleges - 5/4/90	Honorarium	$2,000.	x
Health Insurance Assoc. of America - 6/1/90	Honorarium	$7,500.	x
Nat'l. Assoc. of Real Estate Investment Trusts-5/7/90	Honorarium	$7,500.	x
Bldg & Const. Trades Dept.-AFL-CIO - 1/15/90	Honorarium	$2,000.	
Chicago Research & Trading Group, Ltd. - 6/18/90	Honorarium	$7,500.	x
Aldrich, Eastman & Waltch, Inc. - 2/22/90	Honorarium	$7,500.	x
Wine & Spirits Wholesalers of America, Inc. - 4/25/90	Honorarium	$1,000.	
Steel Service Center Institute - 5/10/90	Honorarium	$150.	x
Confidence Insurance Agency	Spouse Salary	n/a	

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #2

BLOCK A	BLOCK B	BLOCK C	BLOCK D
S-Blackstone Advantage Term Trust	B	Dividend-I	X
S-Boatmens Bancshares Inc.	A*	Dividend-II	X
S-Boeing Co.	C	Dividend-II	X
S-Borden Chem. & Plastic Ltd. Partnership	A*	Partnership Dist.-II	X
S-CAT Natl. Money Market Fund	C	Dividend-IV	
S-Ford Motor Co. Del.	A*		X
S-Giddings & Lewis Dis.	A*		X
S-Helene Curtis Industries, Inc.	B	Dividend-I	
Athlone, Inc.	C	Dividend-IV	
Deluxe Corporation	D	Dividend-III	
Qualified Blind Trust	n/a	Qualified Blind Trust-VI	
S-BP Prudhoe Bay Royalty Trust Units	B	Royalty-II	
S-Willamette Ind. Inc.	A*		X
S-Waste Management Inc.	C	Dividend-I	X
Egyptian Trotting Association Stock	B		
GST Laboratories Stock	A		
Equity Ownership in Ridgemoor CC	B		
S-UNC, Inc.	A*		X
S-Tokheim Corp.	A*		X
S-TJX Co., Inc.	A*		X
S-TRW Inc.	A*		X
S-Service Master Limited Partnership	A*	Partnership Dist.-I	X
S-Prudential Bache MultiSector Fund Class B	B	Dividend-II	X
S-Omnicom Group, Inc.	A*	Dividend-I	X
S-Norfolk Southern Corp.	A*		X
S-Morgan J P & Co., Inc.	A*	Dividend-I	X
S-Midway Airlines Inc. Cum. Prfd. Series D	B	Dividend-II	X
S-McDonalds Corp.	B	Dividend-I	
S-Leslie Fay Co. Inc.	A*		X
S-International Business Machines	A*		X
S-Security Federal Savings & Loan	D	Interest-IV	X
S-Northwestern Savings & Loan	D	Interest-IV	
National Security Bank	B	Interest-V	
S-First Natl. Bank of Chicago (IRA)	B	Interest-II	
S-American Natl. Bank (IRA)	C	Interest-II	
First Natl. Bank of Chicago (IRA)	B	Interest-II	
American Natl. Bank (IRA)	C	Interest-II	
Blackstone Advantage Term Trust**	C	Dividend-III	X
CAT Natl. Money Market Fund**	A*	Dividend-V	
CAT Natl. Government Fund **	E	Dividend-III	
Eastman Kodak Co.**	C	Interest-III	X
Midway Airlines Inc. Cum. Prfd. Series D**	B	Dividend-II	X
Prudential Bache MultiSector Fund Cl.B**	C	Dividend-II	X
Sears Credit Cards Series 1990 B**	C	Interest-III	X
CD Sears Savings Bank**	C	Interest-III	X
CD San Jacinto**	A*	Interest-II	X
CD Atlantic Fin.**	A*	Interest-II	X
East New York Savings Bank	C	Interest-III	
Net Tenant Income - Rental Property, located at Evergreen & Noble Streets, Chicago, Illinois	D	Rental-II	
1/3 Interest in Lot #26, Unit 6,ID#36-24 -16-0010-5800-0000, Pasco Cty,FL	B		
Hernando County, Block Unit 20, Lots7-14, Spring Hills, FL	D		
Collier County, #49801200002, Marco Island, FL	C		
2158 N. Damen Ave., Chicago, IL	C		
NE Corner Blackhawk & Noble Sts., Chicago, IL	B		
1362 W. Evergreen; Chicago, IL	B		
Corner of Ada & Evergreen, Chicago, IL	B		
Corner of Haddon & Noble St., Chicago,IL	B		

* Indicates all shares of stock were sold or ending balance in account was zero on 12/31/90
** Indicates activity in Prudential Bache (KEOGH)

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #3

IDENTIFICATION OF ASSETS	TYPE OF TRANSACTION/DATE	AMOUNT
S-Blackstone Advantage Term Trust	Purchase - 4/27/90	B
S-Blackstone Advantage Term Trust	Sale - 8/31/90	B
S-Boatmens Bancshares Inc.	Sale - 8/31/90	B
S-Boeing Co.	Purchase - 5/22/90	C
S-Borden Chem. & Plastic Ltd. Partnership	Sale - 5/22/90	B
S-Ford Motor Co. Del.	Sale - 1/22/90	B
S-Giddings & Lewis Dis.	Sale - 1/22/90	B
S-Leslie Fay Co. Inc.	Sale - 9/13/90	B
S-International Business Machines	Sale - 1/22/90	B
S-Midway Airlines Inc. Cum. Prfd. Series D	Purchase - 4/26/90	B
S-Midway Airlines Inc. Cum. Prfd. Series D	Sale - 9/13/90	B
S-Prudential Bache MultiSector Fund Class B	Purchase - 6/29/90	B
S-Omnicom Group, Inc.	Sale - 1/22/90	B
S-Norfolk Southern Corp.	Sale - 1/22/90	B
S-Morgan J P & Co., Inc.	Sale - 8/31/90	B
S-UNC, Inc.	Sale - 1/22/90	B
S-Tokheim Corp.	Sale - 1/22/90	B
S-TJX Co., Inc.	Sale - 1/22/90	B
S-TRW Inc.	Sale - 1/22/90	B
S-Service Master Limited Partnership	Sale - 8/31/90	B
S-Willamette Ind. Inc.	Sale - 1/22/90	B
S-Waste Management Inc.	Purchase - 8/17/90	B
S-Waste Management Inc.	Purchase - 10/26/90	B
Blackstone Advantage Term Trust**	Purchase - 4/27/90	C
Eastman Kodak Co.**	Purchase - 1/22/90	C
Midway Airlines Inc. Cum. Prfd. Ser.D **	Purchase - 4/26/90	C
Prudential Bache MultiSector Fund Cl.B**	Purchase - 6/29/90	C
Sears Credit Cards Series 1990 B**	Purchase - 3/1/90	C
CD Sears Savings Bank**	Purchase - 5/16/90	C
CD San Jacinto**	Purchase - 9/26/90	D
CD Atlantic Fin.**	Purchase - 8/08/90	D
CD San Jacinto**	Sale - 10/26/90	D
CD Atlantic Fin.**	Sale - 09/07/90	D
S-Security Federal Savings & Loan	Deposit Inheritance-8/6/90	C

** Indicates activity in Prudential Bache (KEOGH)

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement # 4

SOURCE	BRIEF DESCRIPTION	VALUE
Bob Hope Chrysler Classic	Golf Clothing & Accessories	under $200
A T & T Pebble Beach Pro Am	Golf Clothing & Accessories	under $200
Kemper Pro-Am	Golf Clothing & Accessories	under $200
Danny Thompson Memorial Golf Tournament	Golf Clothing & Accessories	under $200
J. C. Penney Tournament	Golf Clothing & Accessories	under $200

DAN ROSTENKOWSKI

Financial Disclosure Statement for Calendar Year 1990

Statement #5

SOURCE	DATES	BRIEF DESCRIPTION	GIFT
American Association of Advertising Agencies (speech)	3/16-17/90	- 1 day lodging & meals travel: Chgo/Palm Springs/Chgo	
American Association of Association Execs. (speech)	7/30/90	- travel: Chgo/DC	
American Hospital Assn.(speech)	1/29/90	- travel: Chgo/DC/Chgo	
Association of American Medical Colleges (speech)	5/10/90	- 1 day lodging & meals travel: DC/Boston/NY	
AT & T Pebble Beach Pro Am (Charity Golf Tournament)	1/31-2/4/90	- 4 days lodging & meals travel: DC/Monterrey/DC	
Business Roundtable (speech)	4/2-3/90	- 1 day lodging travel: NJ/NY/DC	
Business Roundtable (speech)	12/17/90	- travel: Chgo/NY/DC	
Chicago Research & Trading Group (speech)	6/18/90	- travel: DC/Chgo/DC	
Christ Hospital (speech)	9/13/90	- travel: DC/Cincinnati/DC	
Citibank (speech)	7/26-27/90	- 1 day lodging & meals travel: DC/NY/Chgo	
Committee for Responsible Government (speech)	1/10-12/90 1/6-12/90	- 2 days meals & lodging (1 day for spouse) - travel: Chgo/Hawaii/Maui/Chgo (spouse also)	
Danny Thompson Memorial (Charity Golf Tournament)	8/23-25/90	- 3 days lodging & meals travel Chgo/Idaho/Chgo	
Dean Ritter (speech)	5/14/90	- travel: Chgo/Dublin, OH/Chgo	
Desert Hospital (speech)	2/21-22/90	- 2 days lodging & meals	
Eden Financial Group (speech)	4/24/90	- travel: Chgo/DC	
Financial Executives Institute (speech)	10/1/90	- travel: DC/Chgo/DC	
Futures Industry Assn. (speech)	3/8-11/90	- 3 days meals & lodging travel: DC/W.Palm Beach/Chgo	
Helene Curtis Corp. (speech)	2/25-26/90	- 1 day lodging & meals travel: Palm Springs/Maui/DC	
Bob Hope Chrysler Classic (Charity Golf Tournament)	1/14-20/90	- travel: Chgo/Palm Springs/Chgo & ground transportation (spouse also)	
Hotel, Restaurant Employees International Union (speech)	1/6-9/90	- 4 days meals & lodging (Hawaii) (spouse also)	
Lincoln Natl. Corp.(speech)	4/1-2/90	- 1 day lodging & meals travel: DC/Scottsdale/NJ	
Merrill Lynch (speech)	3/1-4/90	- 3 days lodging & meals travel: DC/Palm Springs/DC	
National Association of Homebuilders (speech)	3/5/90	- travel: Chgo/DC/Chgo	
Natl. Association of Real Estate Invest. Trust (speech)	5/25/90	- travel: DC/Chgo/DC	
National Chain Druggists Association (speech)	4/22-23/90	- 1 day lodging & meals travel: DC/Palm Beach/Chgo	
Nevada Resort Assn. (speech)	12/27-29/90	- 2 days lodging & meals (spouse also) travel: Chgo/Las Vegas/Chgo (spouse also)	
Pacific Telesis Group (speech)	6/21-24/90	- travel: Chgo/San Francisco/Chgo (spouse also)	
J. C. Penney (Charity Golf Tournament)	11/26-29/90	- 3 days lodging & meals travel: Chgo/Tampa/DC	
Pharmaceutical Manufacturers Association (speech)	2/15-17/90	- 2 days lodging & meals travel: Chgo/Scottsdale/Chgo	
Philip Morris (speech)	2/17-20/90	- 4 days lodging & meals travel: Chgo/Palm Beach/Palm Springs	
Public Securities Assn.(speech)	10/27/90	- travel: DC/Boca Raton/Chgo	
RJR Nabisco (speech)	8/14-15/90	- 1 day lodging & meals travel: Chgo/Colorado/Chgo	
Shipbuilders Council of America (speech)	9/14/90	- travel: DC/Chgo/DC	
Frank Sinatra Pro Am (Charity Golf Tournament)	2/23-24/90	- 2 days meals	
U.S.F.& G. (speech)	11/23-26/90	- 3 days lodging & meals (spouse also) travel: Chgo/Palm Springs/Chgo (spouse also)	
Volunteers of America (speech)	5/9/90	- travel: Chgo/DC	

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 11: 20
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Toby Roth
(Full Name)

9524 Locust Hill Drive
(Mailing Address)

Great Falls, Va 22066

Filer Status	[X] Member of the U.S. House of Representatives — State: WI District: 8	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) (8)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Electronics Industries Assoc. 1/15/90	Speech	500.00	
	Chicago Board of Options Exchange 2/22/90	Speech	1,000.00	
	Wisconsin Bankers Assoc. 2/23/90	Speech	1,500.00	
	International Assoc. of Amusement Parks + Attractions 3/13/90	Speech	2,000.00	
	American Council of Life Insurance 3/27/90	Speech	1,000.00	
	National Apartment Assoc 4/2/90	Speech	2,000.00	
	Morgan Guaranty Trust Co. 4/4/90	Speech	2,000.00	
	Equitable Financial Corp. 4/12/90	Speech	2,000.00	
	Institute of Scrap Recycling Industries 4/24/90	Speech	1,000.00	
	ATA Foundation, Inc. 4/27/90	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name

Toby Roth

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Wisc. League of Financial Institutes, Ltd 5/16/90	Speech	2,000.00	
American Bankers Assoc. 5/21/90	Speech	2,000.00	
National Restaurant Assoc. 5/24/90	Speech	1,000.00	X
Am. Society of Travel Agents, Inc. 6/5/90	Speech	500.00	X
Allstate Insurance Co. 6/12/90	Speech	2,000.00	X
Lane Industries, Inc 6/12/90	Speech	1,500.00	X
Chicago Mercantile Exchange 12/10/90	Speech	750.00	X
Board of Trade of the City of Chicago 12/10/90	Speech	750.00	X
National Customs Brokers + Forwarders Assoc. of America 9/28/90	Speech	500.00	
Secura Companies	Directors Fee	7,000.00	
Real Estate	Rents	19,840.00 (net)	

Reporting Individual's Name
Toby Roth

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
JT	972-4 IDA Street, Menasha, WI					X								X								X (net)							
JT	739 S. Fairview - Appleton, WI					X								X								X (net)							
JT	1734-6 E. Amelia St - Appleton, WI					X								X									X (net)						
JT	1366-8 Home Ave. - Menasha, WI					X								X									X (net)						
JT	1525 W. Wisconsin Ave. - Appleton, WI					X								X									X (net)						
JT	1521 W. Kamps Ave - Appleton, WI						X							X										X (net)					

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	417-9 E. Longview Dr - Appleton, WI				X							X								X (Net)						
JT	Crestar Bank - Great Falls, Va			X									X							X						
JT	Air Wisconsin Stock		X															X								

3847

Reporting Individual's Name: Toby Roth

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First Wisconsin Bank - Appleton, WI	Mortgage - 1366-8 Home Ave - Menasha WI		X					

3848

Reporting Individual's Name: Toby Roth

PART VI – TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII – "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government * and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle 3 days food & lodging self and spouse	
Equitable Finance Corp. (Speech)	Mar. 30, 1990	Roundtrip Air Travel, Wash D C to New York, and Lunch	
Morgan Guaranty Trust Co. (Speech)	Apr 2, 1990	Roundtrip Air Travel, Wash D C to New York, and Lunch	
ATA Foundation, Inc (Convention Panelist)	Apr. 26, 1990	Roundtrip Air Travel, Wash D C to Miami, 1 Nite food & lodging self + Spouse	
Davis + Harman (Speech)	May 5, 1990	Roundtrip Air Travel, Wash. D.C to Louisville, food, Kentucky Derby Tickets	
WI League of Financial Inst. (Speech)	May 11, 1990	Roundtrip Air Travel, Wash. D C to Milwaukee & Green Bay	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Toby Roth

Financial Disclosure - 1990

Part VII - Continued

American Bankers Assoc. (speech)	May 30, 1990	Air Travel, Milwaukee, Denver, Wash. D.C. 1 night food + lodging
Hanns Seidel Foundation, (Symposium Participant)	Nov 17-21, 1990	Roundtrip Air Travel, Wash. DC. to Munich, Germany 5 days food + lodging
Konrad Adenauer Stiftung (Forum Participant)	Nov. 27 - 30, 1990	Roundtrip Air Travel, Wash. D.C. to Frankfurt, Germany 4 days food + lodging
Board of Trade, City of Chicago	- Dec 6, 1990 -	One-half Air Travel, Wash. D.C. to Appleton, WI
Chicago Mercantile Exchange	- Dec 6, 1990 -	One-half Air Travel, Wash. DC. to Appleton, WI
Chicago Board of Options Exchange (Speech)	Feb. 23, 1990 -	one night food + lodging

Reporting Individual's Name
Toby Roth

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Director	Secure Companies

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001.)

SIGNATURE OF REPORTING INDIVIDUAL: Toby Roth

DATE (Month, Day, Year): 5/14/91

37-508 (m)

3851

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 30 PM 1:19

1991 MAY 15 AM 11:20

HAND DELIVERED

HAND DELIVERED

(Office Use Only)

Toby Roth
(Full Name)

9524 Locust Hill Drive
(Mailing Address)

Great Falls, Va 22066

Filer Status	[X] Member of the U.S. House of Representatives — State: WI District: 8	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Electronics Industries Assoc. 1/15/90	Speech	500.00	
	Chicago Board of Options Exchange 2/22/90	Speech	1,000.00	
	Wisconsin Bankers Assoc. 2/23/90	Speech	1,500.00	
	International Assoc. of Amusement Parks + Attractions 3/13/90	Speech	2,000.00	
	American Council of Life Insurance 3/27/90	Speech	1,000.00	
	National Apartment Assoc 4/2/90	Speech	2,000.00	
	Morgan Guaranty Trust Co. 4/4/90	Speech	2,000.00	
	Equitable Financial Corp. 4/12/90	Speech	2,000.00	
	Institute of Scrap Recycling Industries 4/24/90	Speech	1,000.00	
	ATA Foundation, Inc. 4/27/90	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name: Toby Roth

PART I – EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Wisc. League of Financial Institutes, Ltd 5/16/90	Speech	2,000.00	
American Bankers Assoc. 5/21/90	Speech	2,000.00	
National Restaurant Assoc. 5/24/90	Speech	1,000.00	X
Am. Society of Travel Agents, Inc. 6/5/90	Speech	500.00	X
Allstate Insurance Co. 6/12/90	Speech	2,000.00	X
Lana Industries, Inc 6/12/90	Speech	1,500.00	X
Chicago Mercantile Exchange 12/10/90	Speech	750.00	X
Board of Trade of the City of Chicago 12/10/90	Speech	750.00	X
National Customs Brokers + Forwarders Assoc. of America 9/24/90	Speech	500.00	
Secure Companies	Directors Fee	7,000.00	
Real Estate	Rents	58,035.00 (Gross) TR 19,840.00 (Net)	

Financial Disclosure A-1(a)

3853

Reporting Individual's Name: Toby Roth

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash. Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
✓ JT 972-4 IDA Street, Menasha, WI				X								X								X (Net)		X (Gross)					T.R.
✓ JT 739 S. Fairview - Appleton, WI				X								X								X (Net)		X (Gross)					T.R.
✓ JT 1734-6 E. Amelia St - Appleton, WI				X								X									X (Net)	X (Gross)					T.R.
✓ JT 1366-8 Home Ave. - Menasha, WI				X								X									X (Net)	X (Gross)					T.R.
✓ JT 1525 W. Wisconsin Ave. - Appleton, WI				X								X									X (Net)	X (Gross)					T.R.
✓ JT 1521 W. Kamps Ave - Appleton, WI					X							X										X (Net)	X (Gross)				T.R.

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
✓	JT	417-9 E. Longview Dr - Appleton, WI				X							X									X (Met)	X (Gone)					
✓	JT	Crestar Bank - Great Falls, Va			X									X							X							
✓	JT	Air Wisconsin Stock		X															X									

Financial Disclosure A-2(a)

3855

Reporting Individual's Name: Toby Roth

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First Wisconsin Bank - Appleton, WI	Mortgage - 1366-8 Home Ave - Menasha WI		X					

3856

Reporting Individual's Name: Toby Roth

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle 3 days food & lodging, self and spouse	
Equitable Finance Corp. (Speech)		Mar. 30, 1990	Roundtrip Air Travel, Wash D C to New York, and Lunch	
Morgan Guaranty Trust Co. (Speech)		Apr. 2, 1990	Roundtrip Air Travel, Wash D C to New York, and Lunch	
ATA Foundation, Inc (Convention Panelist)		Apr. 26, 1990	Roundtrip Air Travel, Wash D C to Miami, 1 Nite food & Lodging self + Spouse	
Davis + Harman (Speech)		May 5, 1990	Roundtrip Air Travel, Wash. D.C to Louisville, Food, Kentucky Derby Tickets	
WI League of Financial Inst (Speech)		May 11, 1990	Roundtrip Air Travel, Wash. D.C to Milwaukee + Green Bay	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Toby Roth

Financial Disclosure - 1990

Part VII - Continued

American Bankers Assoc. (speech)	May 30, 1990	Air Travel, Milwaukee, Denver, Wash. D.C. 1 night food + lodging
Hanns Seidel Foundation, (Symposium Participant)	Nov 17-21, 1990	Roundtrip Air Travel, Wash. DC. to Munich, Germany 5 days food + lodging
Konrad Adenauer Stiftung (Forum Participant)	Nov. 27-30, 1990	Roundtrip Air Travel, Wash. D.C. to Frankfurt, Germany 4 days food + lodging
Board of Trade, City of Chicago	Dec 6, 1990	One-half Air Travel, Wash. D.C. to Appleton, WI
Chicago Mercantile Exchange	Dec 6, 1990	One-half Air Travel, Wash. DC. to Appleton, WI
Chicago Board of Options Exchange (Speech)	Feb. 23, 1990	one night food + lodging

Reporting Individual's Name
Toby Roth

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	Secura Companies

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Toby Roth

DATE (Month, Day, Year): 5/14/'91

37 pgs (m)

3859

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 3:26
U.S. HOUSE OF REPRESENTATIVES

Margaret Roukema
(Full Name)

249 Greenway Road
(Mailing Address)

Ridgewood, New Jersey 07450

Filer Status	[X] Member of the U.S. House of Representatives	State New Jersey District 5	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	University of Medicine and Dentistry - New Jersey	Spouse Salary	N/A	
	Medical Practice	Spouse Sch. C Income	N/A	
	Soc. - Human Resource Management	Honorarium	1,500	
	Securities Industry Association	Honorarium	2,000	
	National Association of Home Builders	Honorarium	2,000	

For additional earned income, use next page

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Reporting Individual's Name
Margaret Roukema

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Ridgewood Savings		X										X						X								
JT	National Community Bank		X										X						X								
S	Equitable Life Assurance		X										X					X									
JT	DLJ Investment Services Group	X											X					X									
S	DLJ Penn Eight LP		X										X						X								
JT	Alliance Tax Exempt Fund					X					X										X						X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Margaret Roukema

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Jefferson Parish, LA HM Mtge 4/1/12			X									X							X							X
JT	Piedmont Muni Power Agency 1/1/22			X									X							X							
JT	Souix City, IA Hosp. Rev. 7/1/94			X									X								X						
JT	NJ ST CTS 6/15/90			X									X						X								X
JT	Single Family Residence Warren, Vermont					X											Rental			X							
S	University of Medicine & Dentistry, N.J. - 401K Plan						X						X										X				
S	Keough Plan - Prudential Bache:																										
	- Blackstone Strategic Trust			X									X					X									
	- P.B. Equity Income Fund		X								X								X								
	- Tandon Corp.		X								X							X									
	- Pru. Acquisition Fund 1 LP		X								X							X									
	- Prime Plus Realty Ptrs. LP		X									X						X									
	- Virginia Elec. & Pwr. Co.		X								X								X								
	- Pru-Bache - MMA		X								X								X								
	- CD Maryland Nat'l. Bank		X										X						X								
	- CD Imperial S & L		X										X							X							
	- CD San Jacinto S & L		X										X					X									
	- CD Far West S & L		X										X							X							

NOTE: Keough Plan was combined with 401K plan and reported as a single line item in 1989.

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Reporting Individual's Name
Margaret Roukema

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	NJ ST CTFS 6/15/90		X		6/15/90		X					
JT	Alliance Tax Exempt Reserves - Sales (1 Item)		X		5/3/90		X					
	- Purchases (7 Items)	X			Various			X				
JT	Jefferson Parish, La HM Mtg. Auth 4/1/12	X			10/24/88		X					
	(The above asset was inadvertantly omitted as a holding on											
	the 1988 and 1989 Financial Disclosure Statements)											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
Margaret Roukema

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	
National Association of Homebuilders	Jan., 1990	Roundtrip Air from Wash. D.C. to Atlanta	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
Margaret Roukema

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Margaret Roukema	May 12, 1991.

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 16 AM 9:52
OFFICE OF
U.S. HOUSE OF REPRESENTATIVES

MAY 13 1991

NC (Office Use Only) 8

J. Roy Rowland
(Full Name)

423 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Georgia District: Eighth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Medical Association, Washington, D.C. (02-28-90)	Honorarium	1000.00	
	American College of Emergency Phys., Dallas, Texas (07-05-90)	Honorarium	1000.00	
	American Healthcare Association, Washington, D.C. (10-12-90)	Honorarium	2000.00	
	American Society of Plastic and Reconstructive Surgeons Arlington Heights, Ill. (07-05-90)	Honorarium	1000.00	
	Chocolate Manufacturers Assoc. of USA, American Cocoa Research Institute, McLean, VA. (01-30-90)	Honorarium	750.00	
	Grocery Manufacturers of America, Inc. Washington, D.C. (07-23-90)	Honorarium	2000.00	
	Hoffman - LaRoche, Inc. Natley, N. Jersey (06-21-90)	Honorarium	1000.00	
	Kaiser Permanente, Oakland, California (08-07-90)	Honorarium	1447.00	
	National Agriculture Chemicals Assoc., Washinton, D.C.(04-05-90)	Honorarium	1000.00	
	National Cable Television Assoc., Wash., D.C. (06-15-90)	Honorarium	1500.00	

For additional earned income, use next page

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Reporting Individual's Name

J. Roy Rowland

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Confectioners Assoc., McLean, VA. (01-30-90)	Honorarium	750.00	
Non-prescription Drug Manufacturers Assoc., Washington, D.C. (05-15-90)	Honorarium	2000.00	
Pfizer, Inc., Washington, D.C. (06-01-90)	Honorarium	1000.00	
Phillip Morris Management Corp., N.Y., N.Y. (11-02-90)	Honorarium	1000.00	
RJR Nabisco Washington, Inc., Wilkms-Barre, PA. (02-11-90)	Honorarium	2000.00	
R. Duffy Wall & Assoc., Inc. Washington, D.C. (06-15-90)	Honorarium	1000.00	
American Medical PAC, Washington, D.C. (08-27-90)	Honorarium	2000.00	
Schering Corporation, Kenilworth, N.J. (03-26-90)	Honorarium	2000.00	
United States Tobacco Co., Greenwich, Conn. (05-03-90)	Honorarium	2000.00	
Roanoke Academy of Medicine, Roanoke, VA. (05-08-90)	Honorarium	250.00	
Cosmetic Toiletries Frag. Assn., Wash., D.C. (03-15-90)	Honorarium	2000.00	
American Academy of Dermatology, Evanston, ILL. (03-22-90)	Honorarium	1500.00	
Total Honoraria		30197.00	
Less: Pine Forest Methodist Church			
Charitable Contributions		3347.00	
Total		26850.00	
Medical Arts Center, Inc., Dublin, Ga.	Director's fee		
	(spouse)	N/A	

Reporting Individual's Name

J. Roy Rowland

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
S	Farmers and Merchants Bank, Dublin, GA.				X									X							X							
JT	Reliance Trust Company, Atl. GA.			X										X						X								
JT	Citizens and Southern National Bank Atl. GA.			X										X						X								
JT	Paine Webber, Inc. Weehawken, N.J.					X						X											X					
	Medical Center (A partnership) Dublin, Ga.													X						X								
	Medical Center (A partnership Dublin Ga.			X														compensation for equity in partnership						X				

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: J. Roy Rowland

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Farm (46 acres); Laurens County, Georgia				X																							
Farm (212 acres); Johnson Co., Georgia					X																						
Dublin Medical Arts Center, Inc.					X																						
Dublin, Ga; Common stock																											
J-Mal, Inc., Dublin, Ga. Common stock					X																						
Pine Forest Meth. Church, Dublin, GA.			X																								
Bonds																											
IRA-Citizens and Southern Bank	S		X																								
Dublin, GA.																											
IRA-Citizens and Southern Bank			X																								
Dublin, GA.																											
SEP (Simplified Employee Pension)				X																							X
Citizens & Southern Bank, Dublin, GA.																											
Keogh (Medical Center), Citizens and Southern Bank, Atlanta, GA.						X																					

Reporting Individual's Name

J. Roy Rowland

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Citizens & Southern Bank - Contributed to SEP	X			12-31-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name

J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Medical Assoc. (congressional seminar)	Jan. 18-21, 1990	Roundtrip Air from Wash. D.C. to Key Biscayne, FLA. for member and spouse	
Grocery Manufacturers of America (speech)	July 20-23, 1990	Roundtrip Air from Wash. to Monterey, Calif. for member and spouse to attend seminar	
Hoffman - LaRoche, Inc. (speech)	June 22,1990	Travel from Dublin, GA., to Atlanta for member and spouse Travel from Atlanta, GA. to Wash., D.C. for member	
Kaiser Permanente (speech)	June 24,1990	Travel for Congressman to San Francisco to participate in Aids and Ethics Conference	
South Carolina Medical Assoc. (speech)	April 27-28, 1990	Roundtrip Air from Wash., D.C. to Charleston, S.C.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

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NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

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NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Roanoke Academy of Medicine (speech)	April 2,1990	Roundtrip Air from Washington, D.C. to Roanoke, VA. Travel and lodging for member only	
Cosmetic Toiletries Frag. Assoc. (trip)	Feb.22-25 1990	Roundtrip Air from Wash., D.C. to Boca Raton, FLa. Travel and Lodging for member and spouse	
Danny Thompson Memorial (Leukemia Seminar)	Aug. 24-28 1990	Participation in Charity Golf Tournament (Travel and Lodging Sun Valley, Idaho) meals for self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

J. Roy Rowland

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Retired Partner	Medical Center, Dublin, Georgia
Director	J-Mal, Inc., Dublin, Georgia

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
09-01-82	Medical Center, Dublin, GA.	On 9-01-82, member withdrew and retired from the partnership (Medical Center, Dublin Ga). Pursuant to agreement member will be reimbursed from equity by participating in division of Partnership earnings (based on a point system adopted by said partnership) and also participate in the partnership retirement (Keogh) Plan through February 29, 1992.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA [X]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J. R. Rowland	May 7, 1991

GPO 1991 37-588 (m)

3873

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 JUN -4 AM 9:52
U.S. HOUSE OF REPRESENTATIVES

MC
9
MAY 31 1991
(Office Use Only)

J. Roy Rowland
(Full Name)

423 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Georgia District: Eighth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Medical Association, Washington, D.C. (02-28-90)	Honorarium	1000.00	
	American College of Emergency Phys., Dallas, Texas (07-05-90)	Honorarium	1000.00	
	American Healthcare Association, Washington, D.C. (10-12-90)	Honorarium	2000.00	
	American Society of Plastic and Reconstructive Surgeons Arlington Heights, Ill. (07-05-90)	Honorarium	1000.00	
	Chocolate Manufacturers Assoc. of USA, American Cocoa Research Institute, McLean, VA. (01-30-90)	Honorarium	750.00	
	Grocery Manufacturers of America, Inc. Washington, D.C. (07-23-90)	Honorarium	2000.00	
	Hoffman - LaRoche, Inc. Natley, N. Jersey (06-21-90)	Honorarium	1000.00	
	Kaiser Permanente, Oakland, California (08-07-90)	Honorarium	1447.00	
	National Agriculture Chemicals Assoc., Washinton, D.C.(04-05-90)	Honorarium	1000.00	
	National Cable Television Assoc., Wash., D.C. (06-15-90)	Honorarium	1500.00	

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For additional earned income, use next page

Reporting Individual's Name

J. Roy Rowland

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Confectioners Assoc., McLean, VA. (01-30-90)	Honorarium	750.00	
Non-prescription Drug Manufacturers Assoc., Washington, D.C. (05-15-90)	Honorarium	2000.00	
Pfizer, Inc., Washington, D.C. (06-01-90)	Honorarium	1000.00	
Phillip Morris Management Corp., N.Y., N.Y. (11-02-90)	Honorarium	1000.00	
RJR Nabisco Washington, Inc., Wilkes-Barre, PA. (02-11-90)	Honorarium	2000.00	
R. Duffy Wall & Assoc., Inc. Washington, D.C. (06-15-90)	Honorarium	1000.00	
American Medical PAC, Washington, D.C. (08-27-90)	Honorarium	2000.00	
Schering Corporation, Kenilworth, N.J. (03-26-90)	Honorarium	2000.00	
United States Tobacco Co., Greenwich, Conn. (05-03-90)	Honorarium	2000.00	
Roanoke Academy of Medicine, Roanoke, VA. (05-08-90)	Honorarium	250.00	
Cosmetic Toiletries Frag. Assn., Wash., D.C. (03-15-90)	Honorarium	2000.00	
American Academy of Dermatology, Evanston, ILL. (03-22-90)	Honorarium	1500.00	
Total Honoraria		30197.00	
Less: Pine Forest Methodist Church			
Charitable Contributions		3347.00	
Total		26850.00	
Medical Arts Center, Inc., Dublin, Ga.	Director's fee		
	(spouse)	N/A	

Reporting Individual's Name

J. Roy Rowland

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
S	Farmers and Merchants Bank, Dublin, GA.				X									X							X							
JT	Reliance Trust Company, Atl. GA.			X										X						X								
JT	Citizens and Southern National Bank Atl. GA.			X										X						X								
JT	Paine Webber, Inc. Weehawken, N.J.					X						X											X					
	Medical Center (A partnership) Dublin, Ga.													X						X								
	Medical Center (A partnership Dublin Ga.			X														compensation for equity in partnership						X				

For additional assets and unearned income, use next page

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Reporting Individual's Name

J. Roy Rowland

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Farm (46 acres); Laurens County, Georgia		X														No reportable income									
	Farm (212 acres); Johnson Co., Georgia			X													No reportable income									
S	Dublin Medical Arts Center, Inc.			X													No reportable income									
	Dublin, Ga; Common stock																									
	J-Mal, Inc., Dublin, Ga. Common stock			X													No reportable income									
	Pine Forest Meth. Church, Dublin, GA.		X								X						No reportable income									
	Bonds																									
S	IRA-Citizens and Southern Bank		X										X				No reportable income									
	Dublin, GA.																									
	IRA-Citizens and Southern Bank		X										X				No reportable income									
	Dublin, GA.																									
	SEP (Simplified Employee Pension)			X									X				No reportable income									X
	Citizens & Southern Bank, Dublin, GA.																									
	Keogh (Medical Center), Citizens and Southern Bank, Atlanta, GA.					X							X				No reportable income									

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: J. Roy Rowland

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Farm (46 acres); Laurens County, Georgia		X																							
	Farm (212 acres); Johnson Co., Georgia				X																					
	Dublin Medical Arts Center, Inc.				X																					
	Dublin, Ga; Common stock																									
	J-Mal, Inc., Dublin, Ga. Common stock				X																					
	Pine Forest Meth. Church, Dublin, GA.		X																							
	Bonds																									
S	IRA-Citizens and Southern Bank		X																							
	Dublin, GA.																									
	IRA-Citizens and Southern Bank		X																							
	Dublin, GA.																									
	SEP (Simplified Employee Pension)			X																						X
	Citizens & Southern Bank, Dublin, GA.																									
	Keogh (Medical Center), Citizens and Southern Bank, Atlanta, GA.					X																				

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Reporting Individual's Name

J. Roy Rowland

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Citizens & Southern Bank - Contributed to SEP	X			12-31-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

"ing Individual's Name

J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (d .n next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Medical Assoc. (congressional seminar)	Jan. 18-21, 1990	Roundtrip Air from Wash. D.C. to Key Biscayne, FLA. for member and spouse	
Grocery Manufacturers of America (speech)	July 20-23, 1990	Roundtrip Air from Wash. to Monterey, Calif. for member and spouse to attend seminar	
Hoffman - LaRoche, Inc. (speech)	June 22,1990	Travel from Dublin, GA., to Atlanta for member and spouse Travel from Atlanta, GA. to Wash., D.C. for member	
Kaiser Permanente (speech)	June 24,1990	Travel for Congressman to San Francisco to participate in Aids and Ethics Conference	
South Carolina Medical Assoc. (speech)	April 27-28, 1990	Roundtrip Air from Wash., D.C. to Charleston, S.C.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name

J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

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NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

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NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
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Roanoke Academy of Medicine (speech)	April 2,1990	Roundtrip Air from Washington, D.C. to Roanoke, VA. Travel and lodging for member only	
Cosmetic Toiletries Frag. Assoc. (trip)	Feb.22-25 1990	Roundtrip Air from Wash., D.C. to Boca Raton, FLa. Travel and Lodging for member and spouse	
Danny Thompson Memorial (Leukemia Seminar)	Aug. 24-28 1990	Participation in Charity Golf Tournament (Travel and Lodging Sun Valley, Idaho) meals for self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
J. Roy Rowland

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Retired Partner	Medical Center, Dublin, Georgia
Director	J-Mal, Inc., Dublin, Georgia

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
09-01-82	Medical Center, Dublin, GA.	On 9-01-82, member withdrew and retired from the partnership (Medical Center, Dublin Ga). Pursuant to agreement member will be reimbursed from equity by participating in division of Partnership earnings (based on a point system adopted by said partnership) and also participate in the partnership retirement (Keogh) Plan through February 29, 1992.

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☐ NA [X]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J. Roy Rowland	May 31, 1991

GPO: 1991 -97-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 JUN 14 PM 2:13

J. Roy Rowland
(Full Name)

423 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Georgia District: Eighth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

JUN 13 1991
MC
(Office Use Only)

8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$8,000	
Fairfax County Board of Education	Spouse Salary	NA	
American Medical Association, Washington, D.C. (02-28-90)	Honorarium	1000.00	
American College of Emergency Phys., Dallas, Texas (07-05-90)	Honorarium	1000.00	
American Healthcare Association, Washington, D.C. (10-12-90)	Honorarium	2000.00	
American Society of Plastic and Reconstructive Surgeons Arlington Heights, Ill. (07-05-90)	Honorarium	1000.00	
Chocolate Manufacturers Assoc. of USA, American Cocoa Research Institute, McLean, VA. (01-30-90)	Honorarium	750.00	
Grocery Manufacturers of America, Inc. Washington, D.C. (07-23-90)	Honorarium	2000.00	
Hoffman - LaRoche, Inc. Natley, N. Jersey (06-21-90)	Honorarium	1000.00	
Kaiser Permanente, Oakland, California (08-07-90)	Honorarium	1447.00	
National Agriculture Chemicals Assoc., Washinton, D.C.(04-05-90)	Honorarium	1000.00	
National Cable Television Assoc., Wash., D.C. (06-15-90)	Honorarium	1500.00	

For additional earned income, use next page

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Reporting Individual's Name

J. Roy Rowland

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Confectioners Assoc., McLean, VA. (01-30-90)	Honorarium	750.00	
Non-prescription Drug Manufacturers Assoc., Washington, D.C. (05-15-90)	Honorarium	2000.00	
Pfizer, Inc., Washington, D.C. (06-01-90)	Honorarium	1000.00	
Phillip Morris Management Corp., N.Y., N.Y. (11-02-90)	Honorarium	1000.00	
RJR Nabisco Washington, Inc., Wilkes-Barre, PA. (02-11-90)	Honorarium	2000.00	
R. Duffy Wall & Assoc., Inc. Washington, D.C. (06-15-90)	Honorarium	1000.00	
American Medical PAC, Washington, D.C. (08-27-90)	Honorarium	2000.00	
Schering Corporation, Kenilworth, N.J. (03-26-90)	Honorarium	2000.00	
United States Tobacco Co., Greenwich, Conn. (05-03-90)	Honorarium	2000.00	
Roanoke Academy of Medicine, Roanoke, VA. (05-08-90)	Honorarium	250.00	
Cosmetic Toiletries Frag. Assn., Wash., D.C. (03-15-90)	Honorarium	2000.00	
American Academy of Dermatology, Evanston, ILL. (03-22-90)	Honorarium	1500.00	
Total Honoraria		30197.00	
Less: Pine Forest Methodist Church			
Charitable Contributions		3347.00	
Total		26850.00	
Medical Arts Center, Inc., Dublin, Ga.	Director's fee		
	(spouse)	N/A	

Reporting Individual's Name

J. Roy Rowland

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
S	Farmers and Merchants Bank, Dublin, GA.			X									X							X						
JT	Reliance Trust Company, Atl. GA.		X										X						X							
JT	Citizens and Southern National Bank Atl. GA.		X										X						X							
JT	Paine Webber, Inc. Weehawken, N.J.				X						X											X				
	Medical Center (A partnership) Dublin, Ga.												X						X							
	Medical Center (A partnership Dublin Ga.		X														compensation for equity in partnership						X			

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: J. Roy Rowland

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Farm (46 acres); Laurens County, Georgia			X													No reportable income									
	Farm (212 acres); Johnson Co., Georgia				X												No reportable income									
S	Dublin Medical Arts Center, Inc.				X												No reportable income									
	Dublin, Ga; Common stock																									
	J-Mal, Inc., Dublin, Ga. Common stock				X												No reportable income									
	Pine Forest Meth. Church, Dublin, GA.		X								X						No reportable income									
	Bonds																									
S	IRA-Citizens and Southern Bank		X										X				No reportable income									
	Dublin, GA.																									
	IRA-Citizens and Southern Bank		X										X				No reportable income									
	Dublin, GA.																									
	SEP (Simplified Employee Pension)			X									X				No reportable income									X
	Citizens & Southern Bank, Dublin, GA.																									
	Keogh (Medical Center), Citizens and Southern Bank, Atlanta, GA.					X							X				No reportable income									

Reporting Individual's Name
J. Roy Rowland

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Citizens & Southern Bank - Contributed to SEP	X			12-31-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name

J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Medical Assoc. (congressional seminar)	Jan. 18-21, 1990	Roundtrip Air from Wash. D.C. to Key Biscayne, FLA. for member and spouse	
Grocery Manufacturers of America (speech)	July 20-23, 1990	Roundtrip Air from Wash. to Monterey, Calif. for member and spouse to attend seminar	
Hoffman - LaRoche, Inc. (speech)	June 22,1990	Travel from Dublin, GA., to Atlanta for member and spouse Travel from Atlanta, GA. to Wash., D.C. for member	
Kaiser Permanente (speech)	June 24,1990	Travel for Congressman to San Francisco to participate in Aids and Ethics Conference	
South Carolina Medical Assoc. (speech)	April 27-28, 1990	Roundtrip Air from Wash., D.C. to Charleston, S.C.	

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Reporting Individual's Name
J. Roy Rowland

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Roanoke Academy of Medicine (speech)		April 2,1990	Roundtrip Air from Washington, D.C. to Roanoke, VA. Travel and lodging for member only	
Cosmetic Toiletries Frag. Assoc. (trip)		Feb.22-25 1990	Roundtrip Air from Wash., D.C. to Boca Raton, FLa. Travel and Lodging for member and spouse	
Danny Thompson Memorial (Leukemia Seminar)		Aug. 24-28 1990	Participation in Charity Golf Tournament (Travel and Lodging Sun Valley, Idaho) meals for self and spouse	
Foreign Policy Institute of Turkey		Aug. 5-12 1990	Round trip airfare from Washington to Turkey Lodging and meals for member and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
J. Roy Rowland

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Retired Partner	Medical Center, Dublin, Georgia
Director	J-Mal, Inc., Dublin, Georgia

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
09-01-82	Medical Center, Dublin, Ga.	On 9-01-82, member withdrew and retired from the partnership (Medical Center, Dublin Ga.). Pursuant to agreement member will be reimbursed from equity by participating in division of Partnership earnings (based on a point system adopted by said partnership) and also participate in the partnership retirement (Keogh) Plan through February 29, 1992.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☐ NA [X]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, §104 and 18 U.S.C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J. Roy Rowland	June 13, 1991

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

'91 JUL -3 P 4:09

HAND DELIVERED

EDWARD R. ROYBAL
(Full Name)

2211 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 25	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (6)
(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Society of Consultant Pharmacists (Oct. 2, 1990)	Speech	$2,500	X

For additional earned income, use next page

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Reporting Individual's Name

EDWARD R. ROYBAL

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	(see page 2)																										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
EDWARD R. ROYBAL

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Congressional Credit Union		X										X						X								
JT	Columbia Savings	X											X					X									
JT	Los Angeles City Credit Union	X											X					X									
JT	National Capitol Bank	X											X					X									
JT	Citizens Bank Corp.	X									X							X									
JT	419 N. Hill Street, Pasadena, CA					X						X										X					
JT	609 Massachusetts Av., Wash. DC					X						X											X				
JT	1010 S. Carolina St., Wash. DC					X						X											X				

Reporting Individual's Name
EDWARD R. ROYBAL

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	419 N. Hill Street, Pasadena, California		X		8-1-90				X			

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	First Interstate Bank Great Western Bank, Los Angeles, CA	Mortgage on 419 N. Hill, CA				X			
JT	Citicorp Mortgage Inc., Washington, DC	Mortgage on 609 Mass. Av., Wash.DC				X			
JT	Fireman Fund, Washington, DC	Mortgage on 1010 S. Carolina, WashDC				X			

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Reporting Individual's Name

EDWARD R. ROYBAL

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
American Indian Higher Ed. Consortium	Quilt	$100
American Indian Higher Ed. Consortium	Wool Blanket	$100

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government * and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
National Association of Latino Elected Officials		June 8-10 1990	Roundtrip Air Travel from Wash. DC to Miami, Florida food & lodging, self and spouse.	X

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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Reporting Individual's Name
EDWARD R. ROYBAL

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	National Association of Latino Elected Officials
President	East Los Angeles Children's Fund, Inc.
President	Edward R. Roybal Foundation

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app. 6, § 104 and 18 U.S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Edward R. Roybal	June 3, 1991 (approved extension)

GPO 1991 37-598 (m)

3896

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

3 12

EDWARD R. ROYBAL
(Full Name)

2211 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 25	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

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(Office Use Only)
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In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Society of Consultant Pharmacists (Oct. 2, 1990)	Speech	$2,500	X

For additional earned income, use next page

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Reporting Individual's Name

EDWARD R. ROYBAL

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	(see page 2)																										

For additional assets and unearned income, use next page

3898

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: EDWARD R. ROYBAL

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Congressional Credit Union		X										X						X								
JT	Columbia Savings	X											X					X									
JT	Los Angeles City Credit Union	X											X					X									
JT	National Capitol Bank	X											X					X									
JT	Citizens Bank Corp.	X									X							X									
JT	419 N. Hill Street, Pasadena, CA				X							X										X					
JT	609 Massachusetts Av., Washin. DC				X							X											X				
JT	1010 S. Carolina St., Wash. DC				X							X											X				
JT	348 Euclid Av., Oakland, CA				X							X								X							

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Reporting Individual's Name
EDWARD R. ROYBAL

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	419 N. Hill Street, Pasadena, California		X		8-1-90				X			

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First Interstate Bank Great Western Bank, Los Angeles, CA	Mortgage on 419 N. Hill, CA				X			
JT	Citicorp Mortgage Inc., Washington, DC	Mortgage on 609 Mass. Av., Wash.DC				X			
JT	Fireman Fund, Washington, DC	Mortgage on 1010 S. Carolina, WashDC				X			

3900

Reporting Individual's Name
EDWARD R. ROYBAL

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
American Indian Higher Ed. Consortium	Quilt	$100
American Indian Higher Ed. Consortium	Wool Blanket	$100

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
National Association of Latino Elected Officials	June 8-10 1990	Roundtrip Air Travel from Wash. DC to Miami, Florida food & lodging, self and spouse	X

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
EDWARD R. ROYBAL

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	National Association of Latino Elected Officials
President	East Los Angeles Children's Fund, Inc.
President	Edward R. Roybal Foundation

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Edward R Roybal	6 [illegible] [illegible]

GPO 1991 37-598 (m)

39902

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Honorable Martin A. Russo
(Full Name)

2233 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

HAND DELIVERED

Filer Status	[XX] Member of the U.S. House of Representatives — State Illinois District 3rd	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
(See attached)				

For additional earned income, use next page

3903

MARTIN A. RUSSO

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT 1990

PART I - EARNED INCOME, INCLUDING HONORARIA

Date	Source	Type	Amount	Directed/Paid to Charity
1/2/90	Gulf Citrus Growers	speech	2000.00	
1/8/90	Producers Advisory Forum	speech	1000.00	
1/10/90	Hotel Employees Restaurant Employees Int'l Union	speech	2000.00	
1/12/90	Disney Studios (MPAA)	speech	2000.00	
1/13/90	USTA-Telco	speech	2000.00	
1/16/90	Sunrise Corp.	speech	2000.00	
1/16/90	South Suburban Managers	speech	2000.00	
1/18/90	Building & Construction Trades	speech	2000.00	
1/19/90	Blue Cross/Blue Shield	speech	2000.00	
1/21/90	Washington Tax Association	speech	1000.00	
1/30/90	IL Hospital Assoc.	speech	1000.00	
2/12/90	Florida Power & Light	speech	1000.00	
2/19/90	Massachusetts Mutual	speech	2000.00	

2/21/90	Coalition Against Regressive Taxation	speech	2000.00	
3/7/90	Blue Cross/Blue Shield	speech	2000.00	
3/10/90	Futures Industry Assoc.	speech	1000.00	
3/14/90	Assoc. of American Railroads	speech	1000.00	Yes
4/26/90	American Assoc. of Physicans	speech	1000.00	Yes
4/21/90	Smokeless Tobacco	speech	2000.00	Yes
5/3/90	Nat'l Restaurant Assoc.	speech	2000.00	Yes
5/23/90	Citizens for a Sound Economy	speech	2000.00	Yes
6/27/90	American Waterways Operators	speech	1000.00	Yes
10/12/90	U.S. Tobacco Executives	speech	2000.00	Yes

**Donated to charity in addition to the above: $150.00

1990	Chicago Board of Education	Spouse salary

Reporting Individual's Name
Congressman Marty Russo

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
JT	Baton Rouge Associates					X							X							X										
JT	LaSalle Bank of River Oaks (savings)				X										X							X								
JT	Polaris Trust IV					X							X										X							
JT	PruTech				X								X								X									
JT	Townhouse located at 3538 Gunston Rd., Alexandria, VA							X						X										X						
	Oak Brook Bank Money Market (IRA)					X									X									X						

For additional assets and unearned income, use next page

3906

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Congressman Marty Russo

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	CATS Series K Due 111593 (IRA)		x													none										
	Kemper Best Series II (IRA)		x										x					x								
	Kemper Summit Fund Inc (IRA)	x									x						x									
	Polaris Aircraft Income Fund I (IRA)		x										x				x									
	Realty Income Corp 24 (IRA)		x										x					x								
S	Oak Brook Bank Money Market (IRA)		x										x					x								
S	CATS Series K Due 111593 (IRA)		x													none										
S	Kemper Best Series II (IRA)		x										x				x									
S	Kemper Summit Fund Inc (IRA)	x									x						x									
S	Polaris Aircraft Income Fund (IRA)		x										x				x									
S	Realty Income Corp 24 (IRA)		x										x				x									

Reporting Individual's Name
Congressman Marty Russo

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [XXX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Carporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Household Mortgage Services, Hanover, Maryland	Mortgage on 3538 Gunston Road, Alexandria, VA			X				

3908

Reporting Individual's Name: Congressman Marty Russo

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Bob Hope/Chrysler Desert Classic (Charity Golf Tournament)	Golf Clothing and Accessories	Less than $200
Kemper Golf Tournament (Charity)	Golf Clothing and Accessories	Less than $200

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
(see attached sheet)			

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

3909

MARTIN A. RUSSO

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT FOR 1990

VII. REIMBURSEMENTS

Source	Brief Desciption
Gulf Citrus Growers	Roundtrip airfare Chi-West Palm Beach-Chi and lodging Dec. 31 - Jan. 2nd, self & spouse.
Hotel Employees & Restaurant Employees International Union	Roundtrip airfare Chi-Kona, Hawaii-Chi and lodging Jan. 8 - 10th.
Sunrise Corp.	Airfare Palm Springs-Chicago Jan. 21st.
Massachusetts Mutual	Roundtrip airfare DC-Ft. Myers-DC and lodging Feb. 16 - 18th.
Futures Industry Association	Airfare DC-West Palm Beach and Ft. Lauderdale-Chi, self Airfare Chi-West Palm Beach and Ft. Lauderdale-Chi for spouse. Lodging March 8 - 10th for both.
National Medical Enterprises	Airfare DC-Orlando-DC, self Airfare Chi-Orlando-Chi, spouse. Lodging April 26 - 28th for both.
Danny Thompson Memorial Golf Tournament	Roundtrip air transportation Chi-Sun Valley, Idaho-Chi, lodging and travel expenses August 21 - 26.

Reporting Individual's Name
Congressman Marty Russo

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [xx]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [xx]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Marty Russo

DATE (Month, Day, Year): May 15, 1991

GPO 1991 37 598 (m)

91 MAY 15 AM 11:20

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MARTIN OLAV SABO
(Full Name)

U. S. House of Representatives - 2201 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S House of Representatives	State: MN District: 5th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D C (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	NA	
Lights Fantastic, Inc. (spousal Income) 6825 Tenyson Dr., McLean, VA	Spouse Salary	NA	
Fingerhut Corporation, Minnetonka, MN (Jan. 5, 1990)	Speech	$2,000	
TRW, Redondo Beach, CA (Jan. 8, 1990)	Speech	$2,000	
Rockwell International, El Sequndo, CA (Jan. 8, 1990)	Speech	$2,000	
Hughes Aircraft, Los Angeles, CA (Jan. 9, 1990)	Speech	$2,000	
LTV Aerospace and Defense Company, DAllas, TX (Jan. 11,1990)	Speech	$2,000	
Bell Helicopter/TEXTRON,INC. Ft. Worth, TX (Jan. 11, 1990)	Speech	$2,000	
Williams & Jensen, Wash., DC (Feb. 10,1990) (participated in Turner Broadcasting Management Mtg. in Miami, FL.)	Speech	$ 500	
American Public Transit Association, Wash., DC (March 13,1990)	Speech	$1,000	
Price Waterhouse, Wash., DC (March 27, 1990)	Speech	$1,000	
The Tobacco Institute, Wash., DC (April 3,1990)	Speech	$2,000	
Burlington Northern Railroad Co., Seattle, WA (April 6, 1990)	Speech	$1,000	
American Society of Association Executives, Wash., DC Washington, DC (April 19, 1990)	Speech	$2,000	
Textron Defense Systems, Wilmington, Massachusetts (June 29, 1990)	Speech	$1,000	
Texas Instruments, Inc., Dallas, TX (July 2, 1990)	Speech	$2,000	

For additional earned income, use next page

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Reporting Individual's Name

MARTIN OLAV SABO

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Rochester Institute of Technology, Rochester, New York (October, 29)	Visit school & Speech	$1,000	
AT&T, Basking Ridge, New Jersey (October 31,1990) Attended Conference & gave speech	Speech	$2,000	
National Rural Electric Cooperative Association Washington, DC (November 16, 1990)	Speech	$1,000	
Harris Corporation, Melbourne, FL (Nov. 20, 1990)	Speech	$1,000	$1,000

Reporting Individual's Name

MARTIN OLAV SABO

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	State of Minnesota (Retirement)		X															X									
	Lutheran Brotherhood (IRA)		X															X									
S	Dean Witter (IRA)		X															X									
	Farm Land (North Dakota)				X													X									
	Farm Land (North Dakota)			X							X	X							X								
	Government Investors Trust			X									X							X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
MARTIN OLAV SABO

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Providence Savings and Loan		X										X						X								
	Congressional Federal Credit Union		X										X						X								
	IDS Mutual Fund		X								X			X				X									
S	First American Bank		X										X						X								
S	Pacific Southwest		X										X							X							
S	Northern States Power (stock)		X								X								X								

Financial Disclosure A-2(a)

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Reporting Individual's Name

MARTIN OLAV SABO

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name
MARTIN OLAV SABO

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Mr. Anthony Maglio, Novato, CA	golf club	$106.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Danny Thompson Memorial Golf Tournament (celebrity participants)	Aug.21-26	Roundtrip Air from MPLS to Pocatello, Idaho, plus five days of food and lodging for self and spouse	
CSX Challenge - Conference Greenbrier, West Virginia	May 27-30	Two days food and lodging for self and spouse to speak at Conference	
National Conference of State Legislaturers, Nashville, TN	Aug. 6-7	Roundtrip air from Washington, DC to Nashville, plus food and lodging (one night) to speak at NCSL meeting	
Rochester Institute of Technology Rochester, NY(visit the facility and give speech)	Oct. 29	Roundtrip air from Washington, DC to Rochester, NY	
Parliamentarians for Global Action New York, NY	June 4	Roundtrip air and other travel expenses to participate in the Tripartite Parliamentary Meeting (one day)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

CONTINUATION - PART VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

Source	Date	Brief Description
AT&T, Basking Ridge, NJ	October 31	Airfare from Wash., DC to Newark, New Jersey to Minneapolis, MN to make speech at Public Affairs Conference in Basking Ridge
Turner Broadcasting System, Inc. Atlanta, GA	Feb. 9-11	Roundtrip airfare from Wash. DC to Atlanta, GA plus 2 days food and lodging (Discussion group on Cable Programming Issues)
TRW, Space & Defense Facility Redondo Beach, CA (visit facility and give speech)	Jan. 7-11	One fifth roundtrip airfare from Washington, DC to Los Angeles CA & Dallas, TX, plus 1/3 share of hotel & Food costs for CA portion of trip
Rockwell International, El Sequndo, CA (visit facility and give speech)	Jan. 7-11	One fifth roundtrip airfare from Washington, DC to Los Angeles, CA and Dallas, TX, plus 1/3 share of hotel and food costs for CA portion of trip
Hughes Aircraft, Los Angeles, CA (visit plant and attend senior management luncheon)	Jan. 7-11	One fifth roundtrip airfare from Washington, DC to Los Angeles, CA and Dallas, TX, plus 1/3 share of food & lodging for CA portion of trip
LTV Aerospace and Defense Company Dallas, TX (visit facility and attend senior management luncheon)	Jan. 7-11	One fifth roundtrip airfare from Washington, DC to Los Angeles, CA and Dallas, TX, plus 1/2 share of hotel and food costs for Dallas portion of trip
Bell Helicopter - TEXTRON Ft. Worth, TX (visit plant and meet with management)	Jan. 7-11	One fifth roundtrip airfare from Washington, DC to Los Angeles, CA and Dallas, TX, plus 1/2 share of hotel and food costs for Dallas portion of trip
TEXTRON Defense Systems Wilmington, Massachusetts	June 29	Roundtrip airfare to Wilmington, Massachusetts (visit plant and speak to management)
Texas Instruments Incorporated Dallas, TX	July 2	Roundtrip airfare to Dallas, Texas (Visit Dart headquarters and give speech at luncheon Mtg.)
Harris Corporation, Melbourne, FL (Visit facility and attend luncheon mtg.)	November 20	Roundtrip airfare plus hotel and food expense for one day
Burlington Northern, Communications and Public Affairs Dept., Ft. Worth, TX	April 6	Roundtrip airfare to Seattle, Washington for tour of facilities and dinner speaking engagement

Reporting Individual's Name
MARTIN OLAV SABO

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Martin O. Sabo	5/15/91

GPO 1991 37-598 (m)

HAND DELIVERED

MARTIN OLAV SABO
5th District, Minnesota

2201 Rayburn House Office Building
Washington, D.C. 20515
(202) 225-4755

462 Federal Courts Building
110 South 4th Street
Minneapolis, Minnesota 55401
(612) 348-1649

Congress of the United States
House of Representatives
Washington, D.C. 20515

DEPUTY MAJORITY WHIP
COMMITTEE ON APPROPRIATIONS
Subcommittees
Defense Transportation
District of Columbia
COMMITTEE ON BUDGET
PERMANENT SELECT COMMITTEE
ON INTELLIGENCE

May 21, 1991

The Honorable Donnald K. Anderson
Clerk, U. S. House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, DC 20515-6612

MC ✓ (2)

Dear Mr. Anderson:

Pursuant to your letter requesting additional explanation on several areas of my Financial Disclosure Statement, I am providing the following information:

Part II. AND III. ASSETS AND "UNEARNED" INCOME

(1) Farm Land - 237 acres Clinton Township, Divide County, N. D. (owned in fee). I receive rent and dividends.

(2) Farm Land - 316 acres Clinton Township, Divide County, N.D. (remainder interest: life estate of Klara Sabo) I receive no income from this property.

(3) Dean Witter (IRA) - This IRA is a mutual fund which includes common stock and bonds. It generates interest, dividends and capital gains, all of which are reinvested.

(4) Lutheran Brotherhood (IRA) - This IRA is a mutual fund and is composed of various bonds. It generates interest which is reinvested.

(5) State of Minnesota - This is a defined benefit retirement plan which I have been vested in for serving 18 years in the Minnesota State Legislature. The state of Minnesota administers and controls the account.

PART VII. "REIMBURSEMENTS"

(1) Danny Thompson Memorial Celebrity Golf Tournament - The travel was August 21 to August 26 but included only four days of food and lodging reimbursement for self and spouse.

THIS PAPER MADE WITH RECYCLED FIBERS — PLEASE RECYCLE

(2) Visits to TEXTRON, Wilmington, Massachusetts; Texas Instruments, Dallas, TX; Harris Corporation, Melbourne, Fl.; and Burlington Northern, Seattle, Washington all originated in Washington, D.C.

I trust this explanation is in compliance with your request. Please let me know if you require additional information.

Yours truly,

Martin

Martin Olav Sabo
Member of Congress

MOS:bg

U.S. HOUSE OF REPRESENTATIVES
1981 MAY 22 PM 2 33

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 12:07
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Bernard Sanders
(Full Name)

22 Killarney Drive
(Mailing Address)

Burlington, Vermont 05401

Filer Status	[X] Member of the U.S House of Representatives	State ____ District ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date: ____

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Hamilton College	Salary - Professor	17,000	
	State University of New York	Salary - Adjunct Faculty	2,950	
	St. Anselm College (February 15, 1990)	Speech	1,000	
	De Paul University (February 16, 1990)	Speech - Travel (1,000 / 823)	1,823	
	University of Illinois at Chicago (February 11, 1990)	Speech	200	
	Pitzer College (February 21, 1990)	Speech	1,000	
	Cal Poly (February 22, 1990)	Speech	1,500	
	Stanford (February 22, 1990)	Speech	500	
	Ursinus College (March 26, 1990)	Speech	1,500	
	Community Action - Massachusetts (May 8, 1990)	Speech	500	

For additional earned income, use next page

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Reporting Individual's Name

Bernard Sanders

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Beloit College (September 21, 1990)	Speech	500	
State University of New York (August 16, 1990)	Speech	1000	
Vermont Magazine (April 1, 1990)	Article	750	
City of Burlington	Spouse Salary	N/A	
*All dates for speeches are dates the speeches were			
given, not dates the money was received. As a new			
member of Congress in 1991, we were not aware of			
these reporting requirements in 1990 and kept our			
records differently. Spoke with Charles Willoughby of			
the Committee staff on May 13, 1990 and he suggested			
I make this notation.			

Reporting Individual's Name

Bernard Sanders

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE [X]

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							

For additional assets and unearned income, use next page

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Reporting Individual's Name

Bernard Sanders

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

3925

Reporting Individual's Name: Bernard Sanders

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
	N/A - new member of Congress in 1991	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
			N/A - new member of Congress in 1991	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Bernard Sanders

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 13, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2 13
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

George Edward Sangmeister
(Full Name)

Route #4, Box #87 Mokena, Illinois 60448
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State: Illinois District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	McKeown, Fitzgerald, Zollner, Buck, Hutchison & Ruttle (Fees earned before January 1989, but not collected until after)	Fees	$14,400	
	State of Illinois	Pension	$27,625	

For additional earned income, use next page

3928

Reporting Individual's Name
George Edward Sangmeister

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Simmons Enterprise - Loan Contract			X									X								X						
	Harris-Frankfort State Bank - Saving Account					X							X								X						
	Makena State Bank - Saving Account		X										X							X							
	Chesterfield S & L - Saving Account		X										X							X							
	New Lenox State Bank - Saving Account		X										X						X								
	Martin Marietta Stock		X								X								X								

For additional assets and unearned income, use next page

3929

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: George Edward Sangmeister

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	IBM Stock		X								X							X									
	Frankfort Bancshares, Inc. Stock			X							X			X					X								X
	Frankfort Township Vacant 80A (10% int)			X									X	X								X					X
	3 Vacant Lots - Village of Frankfort (2/3 interest)					X						X									X						
	Glenwood Building, 2455 Glenwood, Joliet (14%)			X								X									X						
	17 acres-Vacant Minooka (14%)			X										X									X				X
	Village of Frankfort - 1½ acres on Bowen Street			X								X						X									
	Building 26-28 Kansas Street, Frankfort (1/12th int.)			X								X						X									
	First Midwest Bank - Keough Plan					X					X		X	X								X					

Reporting Individual's Name
George Edward Sangmeister

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Frankfort Bancshares Stock		X		10-1-90		X					
	Frankfort Township Vacant 80 acres (10% interest)		X		7-15-90		X					
	17 acres - Vacant Minooka (14% interest)		X		8-10-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Bank of Villa Park (now Bank of Illinois in Dupage)	Business loan		X					
	First Midwest Bank - Joliet, Illinois	Business loan		X					
	Harris-Frankfort State Bank	Mortgage on 3 lots - Frankfort, IL			X				

Reporting Individual's Name
George Edward Sangmeister

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Jewish Federation		Jan. 12-19, 1990	Roundtrip airfare from Chicago to Israel, 6 days food and lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3932

Reporting Individual's Name
George Edward Sangmeister

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board Member	Joliet/Will County Center for Economic Development
Board Member	Silver Cross Hospital Foundation
Partner	McKeown, Fitzgerald, Zollner, Buck, Hutchison & Ruttle (Terminated 1/1/91)

Resigned in 1990 from Frankfort State Bank Board and the Joliet Junior College Foundation Board

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1990	McKeown, Fitzgerald, Zollner, Buck, Hutchison & Ruttle	Leave of Absence Terminated 1-1-91 (see VIII above)

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
George Edward Sangmeister	May 14, 1991

GPO 1991 37-59 (m)

3933

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 6:09

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Richard John Santorum
(Full Name)

127 Seminole Drive
(Mailing Address)

Pittsburgh, PA 15228

Filer Status	[X] Member of the U.S. House of Representatives — State: PA District: 18th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

me (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Kirkpatrick & Lockhart	Salary	7,800.	
	Transitional Infant Care	Salary	1,850.	

For additional earned income, use next page

3934

Reporting Individual's Name: Richard John Santorum

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Courtland Money Fund	X											X						X								

For additional assets and unearned income, use next page

3935

Reporting Individual's Name
Richard John Santorum

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	GARDA PARTNERSHIP		X		12-31-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
S	Landmark Savings, Pittsburgh, PA	Mortgage on 306 Beaver Plaza, State College, PA		X					
S	U.S. Bank, Johnstown, PA	Mortgage on 603 Beaver Terrace State College, PA		X					
S	Student Loan Servicing Center, Harrisburg, PA	Student loan	X						
S	Student Loan Servicing Center, Salt Lake City, Utah	Student loan		X					

Reporting Individual's Name
Richard John Santorum

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
Not a member of Congress in 1990		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Not a member of Congress in 1990				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Richard John Santorum

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board Member	Mt Lebanon Extended Day Program

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Richard Santorum	5-18-91

GPO 1991 37-598 (m)

3938

RICK SANTORUM
18TH DISTRICT PENNSYLVANIA

COMMITTEE ON THE BUDGET
TASK FORCE ON ECONOMIC POLICY
TASK FORCE ON COMMUNITY DEVELOPMENT
COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON EDUCATION, TRAINING AND EMPLOYMENT
SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

Congress of the United States
House of Representatives
Washington, DC 20515

DISTRICT OFFICE
200 FLEET STREET
SUITE 4000
PITTSBURGH, PA 15220
(412) 928-0728

WASHINGTON OFFICE
1708 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2135

HAND DELIVERED

MC

3

June 20, 1991

Mr. Donnald K. Anderson
Clerk, U.S. House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, D.C. 20515

Dear Mr. Anderson:

This letter serves as a formal amendment to my 1990 Financial Disclosure Report. Please note the changes on the attached forms.

On page A-2, Parts II and III, please note the removal of "S" by Courtland Money Fund. Also, I have added the following two assets: 306 Beaver Plaza, State College, Pennsylvania; and 603 Beaver Terrace, State College, Pennsylvania. I overlooked listing these two investment properties as an asset due to the fact that there was a net loss of income in 1990. I have marked both the net and gross income.

On page A-3, Part IV, please note the removal of "S" by GARDA PARTNERSHIP.

On page A-3, Part V, please note the removal of "S" by Landmark Savings, Pittsburgh, Pennsylvania, and U.S. Bank, Johnstown, Pennsylvania.

I appreciate your assistance in promptly amending my record.

Sincerely,

Rick

Rick Santorum
Member of Congress

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

Reporting Individual's Name

Richard John Santorum

HAND DELIVERED

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Courtland Money Fund	X											X						X								
	306 Beaver Plaza, State College, PA				X							X						(net loss)				X	(gross)				
	603 Beaver Terrace, State College, PA				X							X						(net loss)				X	(gross)				

For additional assets and unearned income, use next page

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Reporting Individual's Name
Richard John Santorum

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	GARDA PARTNERSHIP		X		12-31-90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Landmark Savings, Pittsburgh, PA	Mortgage on 306 Beaver Plaza, State College, PA		X					
	U.S. Bank, Johnstown, PA	Mortgage on 603 Beaver Terrace, State College, PA		X					
S	Student Loan Servicing Center, Harrisburg, PA	Student Loan	X						
S	Student Loan Servicing Center, Salt Lake City, UT	Student Loan		X					

3941

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:56
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

WILLIAM CLARENCE SARPALIUS
(Full Name)

126 CANNON HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: TEXAS District: 13th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Don Boucher & Associates, Texas (Apr. 13, 1990)	Honoraria	500	
	FURR'S, INC., Texas (April 13, 1990)	Honoraria	1,000	
	Methodist Hospital, Texas (April 13, 1990)	Honoraria	1,000	
	Philip Morris, Wash. D.C. (April 24, 1990)	Honoraria	1,000	
	Livestock Marketing Assn, MO (April 27, 1990)	Honoraria	2,000	
	Nat'l Agriculture Chemical Assn., Wash. D.C.(May 10, 1990)	Honoraria	500	
	TEXTRON, Texas (May 21, 1990)	Honoraria	2,000	
	LTV, Texas (May 21, 1990)	Honoraria	2,000	
	Florida Sugar Cane League, Wash. D.C. (May 22, 1990)	Honoraria	250	
	Chicago Mercantile Exchange, IL (July 9, 1990)	Honoraria	750	

For additional earned income, use next page

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Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Chicago Board of Trade, IL (July 9, 1990)	Honoraria	750	
Nat'l Agriculture Chemical Assn., Wash. D.C. (Sept.20,'90)	Honoraria	1,000	
FURR'S, INC., Texas (Sept. 22, 1990)	Honoraria	500	
Methodist Hospital, Texas (Sept. 22, 1990)	Honoraria	500	
Food Marketing Institute, Wash. D.C. (Sept. 27, 1990)	Honoraria	1,000	
AMOA Cong'l Pinball Tournament, Wash. D.C. (May 1, 1990)	Winnings	200	X

ting Individual's Name

WILLIAM CLARENCE SARPALIUS

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	Horses (4 - 1 new colt)				X									(Personal pleasure only)															
	Cattle															X							X						X

For additional assets and unearned income, use next page

3944

Reporting Individual's Name
WILLIAM CLARENCE SARPALIUS

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Cattle	X			4-18-90		X					
	Cattle		X		10-4-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Amarillo National Bank, Amarillo, Texas	Campaign Loan			X				

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Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [XX]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Livestock Marketing Assn.		Apr. 27,'90	Air from Wash.D.C.to Kansas City to Amarillo, and dinner	
LTV		5/20-21/90	Air from Amarillo to Dallas, 1 day food & lodging	
Chicago Mercantile Exchange		July 9, '90	Roundtrip Air from Wash. D.C. to Chicago, and lunch	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [XX]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Bill Sarpalius	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

15 6:10

HAND DELIVERED

GUS SAVAGE
(Full Name)

2419 RAYBURN HOUSE OFFICE BUILDING
(Mailing Address)
WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: ILL. District: 2ND	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	ASSOCIATION OF AMERICAN RAILROADS (OF (JUNE 17-18, 1990) WASHINGTON, D.C.)	SPEECH DANA POINT, CALIF.	1,000.00	
	NATIONAL ASSOCIATION OF BLACK ACCOUNTANTS (MIAMI CHAPTER) (JUNE 16, 1990) MIAMI, FLA.	SPEECH	1,500.00	
	CHICAGO MERCANTILE EXCHANGE (SEPT. 17, 1990) CHICAGO, ILL.	SPEECH	1,500.00	
	CHICAGO BOARD OF TRADE (SEPT. 17, 1990) CHICAGO, ILL.	SPEECH	1,500.00	
	AMERICAN POSTAL WORKERS (FEB 9, 1990) CHICAGO, ILL.	SPEECH	500.00	

For additional earned income, use next page

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Reporting Individual's Name
GUS SAVAGE

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity

Reporting Individual's Name
GUS SAVAGE

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE [X]

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	NONE																										

For additional assets and unearned income, use next page

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Reporting Individual's Name
GUS SAVAGE

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NONE								

3951

Reporting Individual's Name
GUS SAVAGE

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☒

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
	NONE	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
THE DONAHUE SHOW (ABC-TV)	APRIL 6, 1990	ROUNDTRIP AIR TRAVEL FROM CHICAGO TO N.Y., 1 NIGHT FOOD AND LODGING, SELF	
UNITED AFRICAN MOVEMENT	MAY 31, 1990	ROUNDTRIP AIR TRAVEL FROM CHICAGO TO N.Y., 1 NIGHT FOOD AND LODGING, SELF	
ASSOCIATION OF AMERICAN RAILROADS	JUNE 17-18, 1990	AIR FARE, MIAMI TO LOS ANGELES TO CHICAGO, 1 NIGHT FOOD AND LODGING, SELF	FOOD & LODGING

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

3952

Reporting Individual's Name
GUS SAVAGE

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☒

Positions	Name of Organization
	NONE

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6 §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Gus Savage

DATE (Month, Day, Year): MAY 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 9 56
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

THOMAS C. SAWYER
(Full Name)
1298 N. HOWARD ST.
(Mailing Address)
AKRON, OHIO 44310

Filer Status	[X] Member of the U.S. House of Representatives — State: OHIO District: 14	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Copley-Fairlawn City Schools	Spouse salary	NA	—
	National Ass'n. of Postmasters of the U.S. (Feb. 21, 1990)	Speech	$1,000.	X

For additional earned income, use next page

3954

Reporting Individual's Name
THOMAS C. SAWYER

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1 000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1 000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	Examples: George Wash Credit Union Accounts			X									X								X						
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	Summit Federal Credit Union		X										X						X								
DC	Summit Federal Credit Union		X										X						X								
	{Wilson Plumbing & Heating, Inc. (mortgage, land contract)}			X									X							X							

For additional assets and unearned income, use next page

Reporting Individual's Name
THOMAS C. SAWYER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

3956

Reporting Individual's Name
THOMAS C. SAWYER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see instructions, page 18

NONE ☒

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see instructions, pages 20–22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle 3 days food & lodging, self and spouse	
Literacy Volunteers of America		NOV. 14-15, 1990	Air transportation to Salt Lake City, overnight accomodations, ground transportation and meals	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
THOMAS C. SAWYER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Tom Sawyer	MAY 11, 1991

GPO 1991 37-598 (m)

Congress of the United States
House of Representatives
Washington, DC

THOMAS C. SAWYER
14TH DISTRICT
OHIO

EDUCATION AND LABOR
FOREIGN AFFAIRS
POST OFFICE AND CIVIL SERVICE
CHAIRMAN, SUBCOMMITTEE ON CENSUS AND POPULATION

INSIDE MAIL

1991 JUN 10 AM 7:49
U.S. HOUSE OF REPRESENTATIVES

May 30, 1991

MC

D

Hon. Donnald K. Anderson
Clerk
US House of Representatives
Office of Records and Registration
1036 Longworth Building
Washington, DC 20515

Dear Mr. Anderson:

I am amending my 1990 Financial Disclosure Statement as follows:

State Teachers Retirement System of Ohio (spouse), accumulated dividends, category C

State Teachers Retirement System of Ohio (self), accumulated dividends, category A

State Employees Retirement System (self), accumulated dividends, category A

Public Employees Retirement System (self), accumulated dividends, category C

This should be included in the category of assets. I understand that I am not required to report accumulated contributions to a life annuity.

Sincerely,

Tom Sawyer

Thomas C. Sawyer
Member of Congress

/det

1518 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-3514
TELEPHONE (202) 225-5231

FEDERAL BUILDING
2 SOUTH MAIN ST., SUITE 405
AKRON, OH 44308-1810
TELEPHONE (216) 375-5710

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 17 AM 10: 13

Hugh James Saxton
(Full Name)

12 Murrell Street
(Mailing Address)

Mount Holly, New Jersey 08060

1991 MAY 17 AM 10: 13

MAY 14 1991

mc

(Office Use Only)

6

Filer Status	[X] Member of the U S House of Representatives State N.J. District 13	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991 must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	H. James Saxton Realty, Inc.	Commissions	$1,000.00	

For additional earned income, use next page

3960

Reporting Individual's Name: Hugh James Saxton

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

		BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
		Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
JT		911 Route 206, Bordentown, N.J.					X						X										X					
		Bank of Mid-Jersey, Bordentown, N.J.	X									X							X									
JT		Congressional Credit Union (Wright-Patman), Washington, DC		X										X						X								
		Mount Holly State Bank, Mount Holly, N.J.				X								X							X							

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hugh James Saxton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Bank of Mid-Jersey (IRA)		X										X						X								
	H. James Saxton, Inc. (Common Stocks)	X																									
	Jim Saxton Realty of Bordentown, Inc. (Common Stocks)	X																									
	Jim Saxton Realty of Bordentown, Inc. - Commercial Division (Common Stocks)	X																									
	(No income derived from the above three listed items)																										

Reporting Individual's Name

Hugh James Saxton

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1 000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover Del				X			
JT	Bank of Mid-Jersey, Bordentown, N.J.	Mortgage on 911 Rt. 206, Bordentown, N.J.		X					

3963

Reporting Individual's Name: Hugh James Saxton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C. to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle. 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name

Hugh James Saxton

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
President	H. James Saxton, Inc. - Business dissolved in 1991

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information see Instructions page 23

NONE ☐

Date	Parties To	Terms of Agreement
12/18/84	Dale Reising and Cindy Egeli	Business dissolved - 1991
10/17/88	Dale Reising, Cindy Egeli & Vernon English	Business dissolved - 1991

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
H. James Saxton	May 13, 1991

GPO 1991 37-398 (m)

H JAMES SAXTON
13TH DISTRICT NEW JERSEY

COMMITTEES
HOUSE ARMED SERVICES
SUBCOMMITTEES
PROCUREMENT
READINESS
MILITARY PERSONNEL AND COMPENSATION

Congress of the United States
House of Representatives
Washington, DC 20515-3013

COMMITTEES
MERCHANT MARINE AND FISHERIES
SUBCOMMITTEES
RANKING REPUBLICAN
OVERSIGHT AND INVESTIGATIONS
FISHERIES AND WILDLIFE CONSERVATION AND ENVIRONMENT
OCEANOGRAPHY, GREAT LAKES AND OUTER CONTINENTAL SHELF

SELECT COMMITTEE ON AGING
SUBCOMMITTEES
HEALTH AND LONG TERM CARE
HUMAN SERVICES
TASK FORCE ON SOCIAL SECURITY AND WOMEN

INSIDE MAIL

RECEIVED
OFFICE OF FINANCIAL DISCLOSURE
1991 JUN 19 PM 3:26
U.S. HOUSE OF REPRESENTATIVES

Donnald K. Anderson
Clerk of the House
Room 105
The Capitol

June 19, 1991

1

MC

Mr. Anderson,

Please amend a typographical error in my financial disclosure statement for 1990.

In part I of the financial disclosure, H. James Saxton Realty, Inc. is incorrect. It should read H. James Saxton, Inc.. Please record this correction in your files.

Sincerely,

H. James Saxton
Member of Congress

HJS/ram

RECEIVED
OFFICE OF FINANCIAL DISCLOSURE
1991 JUN 19 PM 3:26
U.S. HOUSE OF REPRESENTATIVES

REPLY TO
☐ 324 CANNON BUILDING
WASHINGTON DC 20515-3013
(202) 225-4765

☐ 115 HIGH STREET
MT HOLLY NJ 08060
(609) 261-5800

☐ 23 CRESTWOOD VILLAGE
SHOPPING CENTER
WHITING NJ 08759
(201) 350-3838

☐ 1 MAINE AVENUE
CHERRY HILL NJ 08002
(609) 428-0520

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

NITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

[illegible] MAY 14 [illegible] 4:23

HAND DELIVERED

Daniel L. Schaefer (Dan Schaefer)
(Full Name)

10755 West Iliff Avenue
(Mailing Address)

Lakewood, Colorado 80227

Filer Status	[X] Member of the U S House of Representatives	State Colorado District 6th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Jefferson County Public Schools	Spouse Salary	NA	
	TIA, Washington, D.C.,receipt 1-10-90 (speech 12-12-89)	Honoraria - speech	$ 500	X
	Dunn & Bradstreet, Washington, D.C., receipt 4-10-90	Honoraria (12-12-89) - speech	250	X
	EEI, Washington, D.C., receipt 4-26-90	Honoraria (12-13-89) - speech	250	X
	Tobacco Inst., Palm Springs (1-18-90)	Honoraria - speech	2,000	
	Mortgage Banker, Denver, CO (2-28-90)	Honoraria - speech	1,000	
	TCI, Washington, D.C. (3-7-90)	Honoraria - speech	1,000	
	Phillip Morris, Phoenix, AZ (3-10-90)	Honoraria - speech	1,000	
	Comsat, Washington, D.C. (2-27-90)	Honoraria - speech	2,000	
	NAB, Atlanta, GA (3-31-90)	Honoraria - speech	2,000	

For additional earned income, use next page

3967

Reporting Individual's Name

DANIEL L. SCHAEFER

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Duffy Wall, Washington, D.C. (5-15-90)	Honoraria - speech	1,000	
Schering Phough, Washington, D.C. (5-17-90)	Honoraria - speech	1,000	
Nat'l Restaurant, Chicago, IL (5-19-90)	Honoraria - speech	1,000	
Nat'l Cable, Atlanta, GA (5-20-90)	Honoraria - speech	1,500	
U.S. Tobacco, Washington, D.C. (5-30-90)	Honoraria - speech	2,000	
Independent T.V., Washington, D.C. (6-12-90)	Honoraria - speech	500	
Utilities Telecom, Colo Springs, CO (6-18-90)	Honoraria - speech	2,000	
NAB, Washington, D.C. (6-20-90)	Honoraria - speech	1,000	
Jones Intercable, Beaver Run, Co (8-15-90)	Honoraria - speech	2,000	
Waste Management, Chicago, IL (8-22-90)	Honoraria - speech	2,000	
Missouri Cable T.V., Columbia, MO (8-29-90)	Honoraria - speech	1,000	
Hecht Apencer, Washington, D.C. (10-26-90)	Honoraria - speech	1,000	
Ashland Oil, Denver,CO (10-29-90)	Honoraria - speech	2,000	
USTA, Naple, FL (11-15-90)	Honoraria - speech	1,000	X
Honoraria excess		(150)	XX

Reporting individual:

DANIEL L. SCHAEFER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
spouse			Public Employees Retirement Assoc.			X																							
self			Investors Partnership Group, CO			X														X									
self			Adams Investors Group , CO		X															X									
self			Commercial Rental (sold 1-90), CO			X								X		X									X				X
JT			Investment Property, NY		X									X						X									X

For additional assets and unearned income, use next page

3969

Reporting Individual's Name
DANIEL L. SCHAEFER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
self	¼ interest Commercial rental, Grand Junction, CO		X		1-18-90		X					
joint	¼ interest Investment property, New York	X			1-5-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
self	Sovran Mortgage Company	VA townhouse mortgage (¼ interest)		X					
joint	Colorado National Bank, Lakewood, CO	personal loan	X						
joint	1st Nat'l Bank Westland, Lakewood, CO	business & personal loan			X				
joint	Coleman Guymond, Massena New York	¼ interest - investment property	X						
self	1st Nat'l Bank of Grand Junction, CO	commercial business loan		X					
DC	Colorado Student Obligation Bond Authority	student loan				X			

3970

Reporting Individual's Name
DANIEL L. SCHAEFER

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE XXX

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Tobacco Inst.	Jan 18-21 1990	Roundtrip from Washington, DC to Palm Springs, food & 3 days lodging for self and spouse	
Phillip Morris	March 10-11 1990	Roundtrip from Washington, DC to Phoenix, AZ, food & 2 day lodging for self and spouse	
Nat'l American Broadcasting	March 31,90	Roundtrip--Washington, DC to Atlanta, GA, food and 1 day lodging	
Nat'l Restaurant	May 19, 90	Roundtrip--Washington, DC to Chicago, IL, food and 1 day lodging	
Nat'l Cable	May 20, 90	Roundtrip--Washington, DC to Atlanta, GA, food and 1 day lodging	
Waste Management	Aug 22-23	Roundtrip--Washington, DC to Chicago, IL, food and 2 day lodging	
Missouri Cable T.V.	Aug 29, 90	Roundtrip--Denver, CO to Columbia, MO, food and 1 day lodging	
US Telephone Association	Nov 15-18 1990	Roundtrip--Washington, DC to Naples, FL, food and 3 days lodging for self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
DANIEL L. SCHAEFER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Investors Partnership Group
Partner	Adams Investment Froup

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE XXX

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No XX NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No XX NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C app 6, §104 and 18 U S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Daniel L. Schaefer	May 15, 1991

GPO 1991 37-598 (m)

3972

DAN SCHAEFER
6TH DISTRICT COLORADO

1317 LONGWORTH BUILDING
WASHINGTON, D.C. 20515
(202) 225-7882

3615 SOUTH HURON STREET #101
ENGLEWOOD, COLORADO 80110
(303) 762-8890

ENERGY AND COMMERCE COMMITTEE

SUBCOMMITTEES:
TELECOMMUNICATIONS AND FINANCE
TRANSPORTATION AND HAZARDOUS MATERIALS

Congress of the United States
House of Representatives
Washington, D.C.

May 21, 199

HAND DELIVERED

7

MC

The Honorable Donnald K. Anderson
Clerk, U.S. House of Representatives
1036 Longworth H.O.B.
Washington, D.C. 20515

Dear Mr. Anderson:

RE: 1990 FINANCIAL DISCLOSURE STATEMENT

I would like to amend my 1990 Financial Disclosure Statement as follows:

Under Part II: the 1/4 interest I own in investment property in Massena, New York is located at the following address: Lot 304 Wilson Hill, Massena, New York, 13662.

Under Part III: both the Investors Partnership Group and the Adams Investors Group hold investments in undeveloped lands.

Thank you for your attention.

Sincerely,

DAN SCHAEFER
Member of Congress

DS/hp

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 4:24

HAND DELIVERED

Daniel L. Schaefer (Dan Schaefer)
(Full Name)

10755 West Iliff Avenue
(Mailing Address)

Lakewood, Colorado 80227

Filer Status	[X] Member of the U.S. House of Representatives	State: Colorado District: 6th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only)

1991 MAY 21 PM 3:34

3974

In all section: please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Jefferson County Public Schools	Spouse Salary	NA	
	TIA, Washington, D.C.,receipt 1-10-90 (speech 12-12-89)	Honoraria - speech	$ 500	X
	Dunn & Bradstreet, Washington, D.C., receipt 4-10-90	Honoraria (12-12-89) - speech	250	X
	EEI, Washington, D.C., receipt 4-26-90	Honoraria (12-13-89) - speech	250	X
	Tobacco Inst., Palm Springs (1-18-90)	Honoraria - speech	2,000	
	Mortgage Banker, Denver, CO (2-28-90)	Honoraria - speech	1,000	
	TCI, Washington, D.C. (3-7-90)	Honoraria - speech	1,000	
	Phillip Morris, Phoenix, AZ (3-10-90)	Honoraria - speech	1,000	
	Comsat, Washington, D.C. (2-27-90)	Honoraria - speech	2,000	
	NAB, Atlanta, GA (3-31-90)	Honoraria - speech	2,000	

For additional earned income, use next page

Reporting Individual's Name

DANIEL L. SCHAEFER

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Duffy Wall, Washington, D.C. (5-15-90)	Honoraria - speech	1,000	
Schering Phough, Washington, D.C. (5-17-90)	Honoraria - speech	1,000	
Nat'l Restaurant, Chicago, IL (5-19-90)	Honoraria - speech	1,000	
Nat'l Cable, Atlanta, GA (5-20-90)	Honoraria - speech	1,500	
U.S. Tobacco, Washington, D.C. (5-30-90)	Honoraria - speech	2,000	
Independent T.V., Washington, D.C. (6-12-90)	Honoraria - speech	500	
Utilities Telecom, Colo Springs, CO (6-18-90)	Honoraria - speech	2,000	
NAB, Washington, D.C. (6-20-90)	Honoraria - speech	1,000	
Jones Intercable, Beaver Run, Co (8-15-90)	Honoraria - speech	2,000	
Waste Management, Chicago, IL (8-22-90)	Honoraria - speech	2,000	
Missouri Cable T.V., Columbia, MO (8-29-90)	Honoraria - speech	1,000	
Hecht Apencer, Washington, D.C. (10-26-90)	Honoraria - speech	1,000	
Ashland Oil, Denver,CO (10-29-90)	Honoraria - speech	2,000	
USTA, Naple, FL (11-15-90)	Honoraria - speech	1,000	X
Honoraria excess		(150)	XX

Reporting Individual's Name

DANIEL L. SCHAEFER

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
spouse	Public Employees Retirement Assoc.					X																								
self	Investors Partnership Group, CO (undeveloped lands)					X														X										
self	Adams Investors Group , CO (undeveloped lands)				X															X										
self	Commercial Rental (sold 1-90), CO					X								X		X								X						Y
JT	Investment Property, NY				X									X						X										X
	(Lot 304 Wilson Hill, Massena NY)																													

For additional assets and unearned income, use next page

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Reporting Individual's Name
DANIEL L. SCHAEFER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
self	¼ interest Commercial rental, Grand Junction, CO		X		1-18-90		X					
joint	¼ interest Investment property, New York	X			1-5-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
self	Sovran Mortgage Company	VA townhouse mortgage (¼ interest)		X					
joint	Colorado National Bank, Lakewood, CO	personal loan	X						
joint	1st Nat'l Bank Westland, Lakewood, CO	business & personal loan			X				
joint	Coleman Guymond, Massena New York	¼ interest - investment property	X						
self	1st Nat'l Bank of Grand Junction, CO	commercial business loan		X					
DC	Colorado Student Obligation Bond Authority	student loan							

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Reporting Individual's Name
DANIEL L. SCHAEFER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [XXX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Tobacco Inst.	Jan 18-21 1990	Roundtrip from Washington, DC to Palm Springs, food & 3 days lodging for self and spouse	
Phillip Morris	March 10-11 1990	Roundtrip from Washington, DC to Phoenix, AZ, food & 2 day lodging for self and spouse	
Nat'l American Broadcasting	March 31,90	Roundtrip--Washington, DC to Atlanta, GA, food and I day lodging	
Nat'l Restaurant	May 19, 90	Roundtrip--Washington, DC to Chicago, IL, food and 1 day lodging	
Nat'l Cable	May 20, 90	Roundtrip--Washington, DC to Atlanta, GA, food and 1 day lodging	
Waste Management	Aug 22-23	Roundtrip--Washington, DC to Chicago, IL, food and 2 day lodging	
Missouri Cable T.V.	Aug 29, 90	Roundtrip--Denver, CO to Columbia, MO, food and 1 day lodging	
US Telephone Association	Nov 15-18 1990	Roundtrip--Washington, DC to Naples, FL, food and 3 days lodging for self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
DANIEL L. SCHAEFER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Investors Partnership Group
Partner	Adams Investment Froup

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE XXX

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No XX NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No XX NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, § 104 and 18 U.S.C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Daniel L. Schaefer

DATE (Month, Day, Year): May 15, 1991

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

JUL 17 11 12 42

HAND DELIVERED

MC

6

(Office Use Only)

James H. Scheuer
(Full Name)

2221 Rayburn HOB
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State New York District 8	[ ] Officer or Employee	Employing Office.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The New York Times, 3/90	Op Ed Article	$ 150	X
	The Washington Post, 4/90	Op Ed Article	$ 200	X
	St. John's University, 4/90	Speech	$1500	X
	United States Telephone Association, 6/90	Speech	$1000	X
	Metropolitan Burglar Alarm Assoc. of NY, Inc. 12/90	Speech	$1500	X
	The Conference Group, Ltd. 12/90	Speech	$2000	X

For additional earned income, use next page

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Reporting Individual's Name

James H. Scheuer

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X								X								X
			George Wash Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	Merrill Lynch Cash MgmtAcct. (CMA)				X							X										X						
	Smith AO Corp CL B DEL			X								X								X								
	American Home Products				X							X									X							
	Merrill Lynch CMA			X								X									X							
	Riggs National Bank - IRA			X										X							X							
	Riggs National Bank - IRA			X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
James H. Scheuer

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Citibank - CD		X										X						X								
	Riggs National Bank - CD		X										X						X								
	Riggs National Bank - CD		X										X						X								
	Malino & Metcalf		X										X							X							
	Crestar - Savings Acct.		X										X						X								
	Citibank - Money Market				X								X									X					
	Chemical Bank - Super Savings		X										X						X								
	Grantor Trust - J. Scheuer								X		X												X				
	American Home Products Corp.			X										X									X				X
	SBSF Growth Fund					X								X									X				X
	Convertible Security Fund				X									X				X									X
	SBSF Growth Fund		X											X				X									X
	SBSF Growth Fund		X											X				X									X
	SBSF Growth Fund		X											X				X									X

Reporting Individual's Name
James H. Scheuer

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	American Home Products Corp.		X		11-1-90		X					
	SBSF Growth Fund		X		4-16-90				X			
	~~SBSF Growth Fund~~		~~X~~		~~4-16-90~~	~~X~~						
	SBSF Growth Fund		X		4-16-90	X						
	SBSF Growth Fund		X		4-16-90	X						
	Convertible Security Fund		X		9-20-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Grantor-Trust Under Agreement UTD 2/28/69								
	James H. Scheuer (Grantor):								
	a) Capitol Towers, Unit II Trust	Mortgage, apt. bldg., Sacto, CA					X		
	b) Overseas Discount Corp.	Capital Mall Tract III, Sacto., CA					X		

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Reporting Individual's Name

James H. Scheuer

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C 7342)

Reporting Individual's Name
James H. Scheuer

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Partner	Air Rights Hotel
Partner	Maryland Salisbury Associates
Partner	Passaic Carlton Tower Limited Partnership
Partner	Wisconsin Associates
President	GLOBE International (Global Legislators Organized for a Balanced Environment)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James H. Scheuer	6/17/91

GPO 199 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 1:54
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Steven H. Schiff
(Full Name)

1427 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: NM District 1	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. Air Force	Reserve Salary	$6,639	
	Ethicon, Inc.	Spouse Salary	N/A	
	U.S. Army	Spouse Reserve Salary	N/A	

For additional earned income, use next page

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Reporting Individual's Name
Steven H. Schiff

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X							X								X
	George Wash. Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
JT	Real Estate Contract-Coal Ave.		X										X	X				X								
JT	First Interstate Bank Savings			X									X						X							
JT	General Electric Savings Trust		X								X							X								
JT	Sunwest Bank Savings	X											X				X									

For additional assets and unearned income, use next page

3987

Reporting Individual's Name
Steven H. Schiff

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	N/A											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	Bank of Albuquerque	Personal Loan	X						

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Reporting Individual's Name
Steven H. Schiff

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
N/A		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
N/A				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Steven H. Schiff

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Steven H. Schiff	5-15-91

GPO 1991 37-598 (m)

3990

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 AM 9 11

INSIDE MAIL

(Office Use Only) 18

PATRICIA SCHROEDER
(Full Name)

2208 RAYBURN HOB
(Mailing Address)

WASHINGTON, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State COLORADO District 1ST	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2 1990)	Speech	$1 000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6 000	
	Fairfax County Board of Education	Spouse Salary	NA	
	HONORARIA — SEE ATTACHED LIST			
	KAPLAN RUSSIN & VECCHI	SPOUSE —	N/A	
	1215 17TH ST, N.W.	LAW PRACTICE		
	WASHINGTON, D.C. 20036			

For additional earned income, use next page

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Reporting Individual's Name

SCHROEDER

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
S	AFFILIATED FUND / MUTUAL FUND SHARES			X							X			X						X						X
S	FOUNDERS GROWTH FUND / MUTUAL FUND SHARES		X								X								X							
JT	KEMPER TAX EXEMPT FUND / MONEY MARKET FUND DEPOSITS		X								X								X							
DC	FUND FOR GOVERNMENT INVESTORS / MONEY MARKET FUND DEPOSITS			X							X									X						
S	NEW YORK LIFE INS. CO. / INSURANCE DEPOSITS		X										X						X							
JT	AMERICAN EXPRESS DAILY TAX FREE DIV. FUND (FORMERLY SLH, ETC.) / ~~MONEY MARKET FUND DEPOSITS~~		X								X								X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: SCHROEDER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	UNIT 101, DEXTER PLACE CONDOMINIUM, DENVER, COLO.			X								X									X					
JT	UNIT 205, DEXTER PLACE CONDOMINIUM, DENVER, COLO.			X								X									X					
JT	REPRESENTATIVE, INC., DENVER, COLO. / STOCK		X															X								
	REPRESENTATIVE, INC., DENVER, COLO. / PROMISSORY NOTE		X															X								
JT	T.D.R. ASSOCIATES DENVER, COLO. / LIMITED PARTNERSHIP INT.		X										X					X								
S	DREYFUS GOLD DEPOSITS / TROY OZS.		X															X								
S	SHEARSON LEHMAN HUTTON DIRECT. UNIT INVEST. TRUST SERIES 88 / SHS.		X															X								X
JT	MFS MUNICIPAL INCOME TRUST SBI / SHARES			X							X									X						
JT	STRIPS-TINT-U.S. TREASURY / BONDS			X														X								
JT	GABELLI VALUE LINE FUND / MUTUAL FUND SHARES		X								X								X							
	RETIREMENT PROGRAMS:																									
S	SHEARSON-LEHMAN IRA:																									
S	STRIPS-U.S. TREASURY / BONDS			X														X								
S	SHEARSON LEHMAN STRATEGIC INVESTORS PORT. / MUTUAL FUND		X								X			X					X							X
S	GNMA INCM FD #K / UNITS INVESTMENT TRUST		X										X						X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: SCHROEDER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
SHEARSON LEHMAN EMPLOY. RET. ACCT.:	S																									
AMERICAN EXPRESS DAILY DIVIDEND FUND (MUTUAL FUND)	S		X								X							X								
GNMA INCM FD # K-UNITS INVESTMENT TRUST	S			X									X						X							
CAPITOL FED. SAVINGS, DENVER, COLO. IRA / CD'S	S		X										X						X							X
WOMENS NATL. BANK, DENVER, COLO. IRA / CD'S			X										X						X							
MONY 401(K) PLAN:																										
MONY SECURITIES CORP. MONEY MARKET FUND / DEPOSITS			X								X								X							X
FIRST TRUST GNMA FD SEC 42 / UNITS INVESTMENT TRUST			X										X						X							
KEMPER GOVT. SECS. TRUST GNMA 4 / UNIT INVESTMENT TRUST			X										X						X							
ENTERPRISE GROWTH + INCOME MONEY MARKET FUND / SHARES				X							X									X						X
AMERICAN SECURITY BANK, WASHINGTON, D.C. / CHECKING ACCT.			X															X								

Reporting Individual's Name
SCHROEDER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1 000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence unless it is rented out For further information see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY, YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	SHEARSON LEHMAN HUTTON DIRECTIONS UNIT INVESTMENT TRUST SERIES 78 — SHARES		X		9-28-90	X						
S	SHEARSON LEHMAN HUTTON DIRECTIONS UNIT INVESTMENT TRUST SERIES 88 — SHARES	X			10-2-90	X						
	TRANSFER OF DEPOSITS IN LIQUID GREEN TRUST MONEY MARKET FUND TO MONY SEC. CORP. MONEY MARKET FUND			X	12-14-90	X						
	ENTERPRISE GROWTH & INCOME FUND — SHARES	X			1-10, 6-29, 8-1 and 12-31-90	X						
S	ROLLOVER EXPIRING CD'S TO SHEARSON LEHMAN STRATEGIC INVESTORS PORT. / MUTUAL FUND			X	1-14 and 9-10-90	X						
S	— AFFILIATED FUND — INCOME REINVESTMENTS	X			PERIODIC	X						
S	— TRANSFER OF CASH EQUIVALENT MMF TO KEMPER TAX FREE MMF			X	5-29-90	LESS THAN $1,000						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15 001 - $50,000	D $50 001 - $100,000	E $100,001 - $250 000	F $250 001 - $500 000	G $500 001 - $1,000,000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, De				X			
JT	WORLD SAVINGS, DENVER, COLORADO	MORTGAGE ON UNIT 101, DEXTER PLACE CONDOMINIUM, DENVER, COLO.			X				

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Reporting Individual's Name
SCHROEDER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20–22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
SEE ATTACHED LIST			

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C. 7342)

3996

Reporting Individual's Name
SCHROEDER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization
SOLELY OF AN HONORARY NATURE	NUMEROUS

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Patricia Schroeder

DATE (Month, Day, Year): May 10, 1991

GPO 1991 37-598 (m)

As of January 10, 1991

Rep. Pat Schroeder (Colorado-1st)
1990 Honorarium Information for Financial Disclosure Report

SOURCE (Date payment was received) All speeches, less otherwise noted	HONORARIUM (Disposition to charity)	REIMBURSED EXPENSES
10/23/89 Junior League of Charlotte in Charlotte, NC (1/2/90)	3000 (1000 to charity)	Reported in 1989
1/8/90 Foxcroft School in Middleburg, VA (1/19/90)	5000 (3000 to charity)	(food and limousine service)
1/11 Shoreline Community College in Seattle, WA (1/24/90)	2997.75 (997.75 to charity)	(air, food, one night lodging, & cab) Self: DC-Seattle Aide: DC-Seattle -DC
1/12 - 1/15 National Cable Television Association in Los Angeles, CA (2/6/90)	1500	(air, food, & three nights lodging) Self: Seattle-Los Angeles -Denver Spouse: DC-Los Angeles-DC
1/18 State Bar of Wisconsin in Milwaukee, WI	0	(air, food, one night lodging & parking) Self & Aide: DC-Milwaukee-DC

1/21 National Council of Jewish Women in Columbus, OH (2/7/90)	3000 (1000 to charity)	(air, food, one night lodging, & cab) Self: Cleveland-Columbus-DC Aide: DC-Columbus-DC
1/29 Planned Parenthood of Chicago in Chicago, IL	0	(air & food) Self: New Orleans-Chicago-DC Aide: Baltimore-Chicago-DC
1/30 Ortho Pharmaceutical Company in New York City, NY Award Recipient	(2500) (charity)	(air & cab) Self & Aide: DC-NY-DC
2/4 Penn State University in Harrisburg, PA (2/20/90)	3000 (1000 to charity)	(air, food, & one night lodging) Self: DC-Harrisburg-DC Aide: (no air, but food, & one night lodging)
2/6 Shipbuilders Council of America in Washington, DC (2/15/90)	1000	(food only) Self & Spouse
2/12 Planned Parenthood League of Massachusetts in Boston, MA	0	(shared air & food) Self: DC-Boston-DC

2/12 Salem State College in Salem, MA (3/19/90)	5500 (3500 to charity)	(shared air, food, one night lodging, & parking) Self: DC-Boston-DC Aide: Baltimore-Boston-DC
2/16 Westlake School for Girls in Los Angeles, CA (2/17/90)	2208.09 (208.09 to charity)	(air, food, & two nights lodging) Self & Aide: DC-Los Angeles-DC
2/16 Occidental College in Los Angeles, CA (3/22/90)	3000 (1000 to charity)	(air, food, & cab) Aide: DC-Los Angeles-DC
2/21 National Association of of Postmasters of the United States in Washington, DC (3/7/90)	1000	0
2/23 University of Iowa in Iowa City, IA (3/9/90)	3000 (1000 to charity)	(air, food, & cab) Self: DC-Cedar Rapids-Newark Aide: DC-Cedar Rapids-DC

2/25 University of Florida in Gainesville, FL (2/25/90)	3000 (1000 to charity)	(air, food, & one night lodging) Self: Philadelphia -Gainesville -DC Aide: DC- Gainesville -DC
2/28 Foundation for Women's Resources in Washington, DC (3/20/90)	500	0
3/5 YWCA Rockford in Rockford, IL (4/11/90)	3000 (1000 to charity)	(air & food) Self & Aide: DC-Chicago- DC
3/9 Atlanta Historical Society in Atlanta, GA (4/10/90)	(3000) (charity)	(air, food, & parking) Self & Aide: DC-Atlanta -DC
3/10 Drake University in Des Moines, IA (3/10/90)	(500) (charity)	(air, food, & one night lodging) Self & Aide: DC-Des Moines-DC
3/12 Armed Forces Marketing Council in Washington, DC (3/27/90)	(2000) (charity)	(food only)
3/15 Society for Human Resource Management in Washington, DC (4/24/90)	(2000) (charity)	0
3/16 Minnesota Social Services in Bloomington, MN (4/23/90)	(3000) (charity)	(air & food) DC- Minneapolis -Denver

3/19 Miami-Dade Community College in Miami, FL (4/23/90)	2187.76 (1771.28 to charity)	(air, food, & one night lodging, & tips) Self: DC-Miami-DC Aide: DC-Fort Lauderdale-DC
3/22 Women's Law Association at American University in Washington, DC (4/9/90)	(700) (charity)	0
3/24 Washington Women's Employment & Education in Tacoma, WA (3/24/90)	(1851) (charity)	(air & food) Self & Aide: DC-Seattle -DC
3/26 "Firing Line" in Columbia, SC (3/26/90) Television appearance Paid by National Review, Inc.	(6428) (charity)	(air, food, & one night lodging) Self & Aide: DC-Columbia -DC
3/30 Young Presidents Organization in West Palm Beach, FL	0	(air, food, three nights lodging, & cab) Self & Daughter: DC-West Palm Beach-DC
4/28 DePaul University in Chicago, IL (5/22/90)	(3000) (charity)	(air, food, & one night lodging) Self: Denver-Chicago-Newark Aide: DC-Chicago -Newark

4/28 Sane Freeze of Montclair in Newark, NJ (4/28/90)	(500) (charity)	(air, food, limousine service, & tip) Self & Aide: Newark-DC
4/30 National Alliance of Nurse Practitioners in Washington, DC (5/22/90)	(2000) (charity)	0
5/5 Municipal Elections Committee of Los Angeles in Los Angeles, CA	0	(air, food, & one night lodging) Self & Aide: DC-Los Angeles-DC
5/7 Junior League in Indianapolis, IN (6/11/90)	(3000) (charity)	(air, food, & one night lodging) Self & Aide: DC-Indianapolis -DC
5/12 University of Minnesota School of Law in Minneapolis, MN (8/16/90)	(3000) (charity)	(shared air & food) Self & Aide: DC-Minneapolis -DC
5/12 Minneapolis Community College in Minneapolis, MN (7/31/90)	(3000) (charity)	(shared air, food, one night lodging, & cab) Self & Aide: DC-Minneapolis -DC

5/18 Tiger Bay of Ocala in Ocala, FL (6/1/90)	(3000) (charity)	(air, food, & cab) Self: DC- Gainesville -Orlando -Denver Aide: DC- Gainesville -Orlando -DC
5/21 Summit County Alcohol, Drug Addiction, & Mental Health Services Board in Akron, OH (6/25/90)	(3000) (charity)	(air, food, & cab) Self & Aide: DC- Cleveland -DC
6/2 Time Warner, Inc. in Los Angeles, CA	0	(air, food, & one night lodging) Self & Spouse: DC-Los Angeles- Denver
6/25 Planned Parenthood of Houston in Houston, TX	0	(air, food, & one night lodging) Denver- Houston-DC
6/30 Capital Gang in Washington, DC (8/6/90) Television appearance Paid by Turner Broadcasting Systems, Inc.	(200) (charity)	0
7/13 National Pediatric Trauma Nursing Conference in Washington, DC (8/7/90)	(2000) (charity)	0
7/29 Midwest Academy in Chicago, IL	0	(air only) Denver- Chicago- DC

8/1 Newsday 8/1/90 Article (8/21/90) Paid by Times Mirror Newspaper	(250) (charity)	0
8/8 World Affairs Council of Northern California in San Francisco, CA	0	(shared air & food) DC-San Francisco
8/8 California Abortion Rights Action League in San Francisco, CA (9/20/90)	(250) (charity)	(shared air, food & one night lodging) DC-San Francisco
8/9 American Association of Women Podiatrists in Las Vegas, NV (8/9/90)	(3000) (charity)	(air, food, & one night lodging) Self: San Francisco -Las Vegas -Denver Spouse: DC -Las Vegas -Denver
8/22 John F. Kennedy School of Government at Harvard University in Boston, MA (10/6/90)	(500) (charity)	(air, food & cab) DC-Boston -DC
8/23 Women in Action in Houston, TX (8/23/90)	(3000) (charity)	(air & food) DC-Houston -DC

9/1 Tennessee Women's Political Caucus in Nashville, TN	0	(air, food & one night lodging) Self: DC-Nashville -Dallas -Denver Daughter: DC-Nashville -DC
9/10 "Firing Line" in Hillsdale, MI (10/3/90) Television appearance Paid by National Review, Inc.	(13360) (charity)	(air, food, & one night lodging) Self & Aide: DC-Detroit -DC
9/21 Nikki van Hightower Campaign in Houston and in Dallas, TX	0	(air & food) DC-Houston Dallas-Denver
11/8 West Chester University in West Chester, PA (12/10/90)	(5000) (charity)	(train & food) Self & Aide: DC-Wilmington -DC
11/9 Adelphi University in Garden City, NY (12/12/90)	(3000) (charity)	(air & cab) Self & Aide: DC-NY-DC
11/12 Pacific CEO Institute in Pebble Beach, CA (12/21/90)	(1811.37) (charity)	(air, food, & two nights lodging) Self & Spouse: DC-San Francisco -Monterey -San Francisco Denver-DC

11/13 Wright State University Dayton, OH (12/10/90)	(5000) (charity)	(air, food, & one night lodging) Self & Aide: DC-Dayton-DC
11/15 Financial Executives Institute in Pentagon City, VA (11/19/90)	(2000) (charity)	0
11/16 Regional Forum for Women State Legislators in St. Louis, MO	0	(air, food & one night lodging) DC-St. Louis -Atlanta
11/16 Democratic National Committee Trustees in Atlanta, GA	0	(food & one night lodging) Self & Spouse
11/17 Boston College in Newton, MA (11/17/90)	(3000) (charity)	(air, food, & parking) Self: Atlanta-Boston-DC Aide: DC-Boston--DC
11/19 Economic Club in St. Joseph, MI (12/3/90)	(8000) (charity)	(air, food, limousine service, & one night lodging) Self & Aide: DC-Chicago -South Bend -Chicago -DC
11/27 College of William & Mary in Williamsburg, VA (12/14/90)	(3000) (charity)	(air, food, & private car) DC-Norfolk

11/28 State University of New York in Buffalo, NY (12/10/90)	(5000) (charity)	(air, food, & one night lodging) Self & Aide: DC-Buffalo
11/29 State University of New York in Geneseo, NY (12/10/90)	(5000) (charity)	(air, food, & one night lodging) Self & Aide: Rochester-DC
12/2 The Washington Post in Washington, DC (12/20/90) Essay for Reading Bookworld	(50) (charity)	0
12/4 Planned Parenthood of Southern Indiana in Columbus, IN (12/4/90)	(3000) (charity)	(air, food, & one night lodging) Self & Aide: DC-Indianapolis-DC
12/6 National Council for Resource Development in Washington, DC (12/20/90)	(3000) (charity)	(parking)
12/7 Panhandle Tiger Bay Club in Pensacola, FL (12/7/90)	(2903) (charity)	(air & food) Self & Aide: DC-Charlotte-Pensacola-Dallas/Ft. Worth-Denver
12/11 John McLaughlin Show in Ft. Lee, NJ Television appearance	0	(air only) DC-Newark-DC

Honoraria Limit:	$26,850.00
Total Honoraria Earned:	$157,696.97
Total Charitable Contributions:	$131,280.49
Total Honoraria Retained for Personal Use:	$26,416.48

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Richard T. Schulze
(Full Name)

2367 Rayburn Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State PA District 05	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

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MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Grocery Manufacturers Association, Wash. D.C., 1/9/90.	Speech	2,000	
	SmithKline Beecham, Wash. D.C., 1/25/90.	"	1,000	
	American Society of Association Executives, Wash. D.C., 1/8	"	2,000	
	Tenneco, Inc., Williamsburg, VA, 1/31/90	"	2,000	
	Smokeless Tobacco Council, Wash. D.C., 1/11/90	"	1,000	
	R. Duffy Wall Associates, Wash. D.C., 1/11/90	"	1,000	
	Organization Management Conference, Wash. D.C., 3/9/90	"	2,000	
	Bergson & Company, Wash. D.C., 3/27/90	"	1,000	
	Tobacco Institute, Wash. D.C., 4/24/90	"	2,000	
	Reid and Priest, Wash. D.C., 5/2/90	"	2,000	

For additional earned income, use next page

4009

Reporting Individual's Name
Richard T. Schulze

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Coalition Against Regressive Taxation, Wash. D.C., 5/8/90	Speech	2,000	
American Paper Institute, Wash. D.C., 5/24/90	"	1,000	
American Association of Dental Schools, Wash. D.C., 6/4	"	2,000	
National Rifle Association, New Orleans, LA, 10/5/90	"	1,000	
Delaware Investment Advisors, Wash. D.C., 10/1/90	"	2,000	
U.S. Business and Industrial Council, Wash. D.C., 10/9/90	"	500	
TOTAL -	-	$25,500	

4010

Reporting Individual's Name

Richard T. Schulze

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	First American Bank		X										X						X								
	G.I.T. Money Market Account		X										X						X								
	Condominium, 20 Rittenhouse Ct., Wayne					X																					
	100 Acres land, Hardy County, WV				X																						
	1/2 acre land, Magens Bay, U.S. V.I.			X																							
	Oahu Limited Partnership			X																							

For additional assets and unearned income, use next page

4011

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Richard T. Schulze

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Wright Patman Federal Credit Union		X								X							X									
	South Branch Valley Bank of WV		X										X					X									
	First American Bank				X												C D				X						

4012

Reporting Individual's Name
Richard T. Schulze

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

4013

Reporting Individual's Name
Richard T. Schulze

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Danny Thompson Memorial Charitable Golf Tournament	8/22-26/90	Roundtrip air from Wash. D.C. to Sun Valley, Utah, 4 days food and lodging	
National Sportsman's Alliance	2/3-4/90	Roundtrip air from Wash. D.C. to Las Vegas to Reno, 2 days food and lodging	
National Rifle Association	9/6-7/90	Roundtrip air from Wash. D.C. to New Orleans, LA, 1 night food and lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Richard T. Schulze

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Limited Partner	Oahu Limited Partnership

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	05/15/91

GPO 1991 37-598 (m)

RICHARD T SCHULZE
5TH DISTRICT PENNSYLVANIA

WAYS AND MEANS
COMMITTEE

Congress of the United States

House of Representatives • Washington, DC 20515

1991 MAY 24 PM 12:19
U.S. HOUSE OF REPRESENTATIVES

(1)

HAND DELIVERED

May 23, 1991

✓
MC

The Honorable Louis Stokes
Chairman
Committee on Standards of Official Conduct
H-T2 Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

Per a discussion with Mark Davis of your staff I am writing to add additional information on the "Oahu Limited Partnership" listed on the bottom line of page A-2 of my financial disclosure form.

The Oahu Limited Partnership is part ownership in a 25,000 sq. ft. warehouse building and ground lease located in Campbell Industrial Park, Honolulu, Hawaii. I receive no annual income from the partnership. I hope this information is helpful to you.

Please call me or my Chief of Staff, Rob Hartwell, at 225-5761 with any questions.

Sincerely,

Dick

DICK SCHULZE
Member of Congress

PLEASE RESPOND TO

☐ 2267 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5761

☐ 10 SOUTH LEOPARD ROAD
SUITE 204
PAOLI, PA 19301
800-362-5652 (TOLL FREE)
215-648-0555

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 16 AM 11: 37
U.S. HOUSE OF REPRESENTATIVES

MAY 15 1991

Charles E. Schumer
(Full Name)

Rayburn House Office Bldg., Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State NY, District 10th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	US House of Representitives	Member Salary	90,645	
	City of NY	Spouses Salary	89,047	

For additional earned income, use next page

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Reporting Individual's Name: Charles Schumer

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Merrill Lynch Ready Asset				X						X										X						
JT	Merrill Lynch Ready Asset			X							X										X						
	Value Line		X								X								X								
DC	Resource Accrued Mtg Interest		X										X						X								
S	Merrill Lynch O Treas - IRA			X									X							X							
JT	Citibank - CD		X										X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles Schumer

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Resources Trust Co - IRA		X										X						X								
	Resources Trust Co. IRA		X										X						X								
	Citibank Checking Acct		X																								

Reporting Individual's Name: Charles Schumer

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Independence Savings Bank (personal residence mtg)	Mortgage on 9 Prospect Pk West Apt 10B Brooklyn NY				X			

4020

Reporting Individual's Name: Charles Schumer

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Miami University-Congressional Workshop	Jan 12-14, 1990	Roundtrip from NY to Miami, 3 days food + lodging self + spouse	
COMEX-Annual Mtg	March 9-11, 1990	Roundtrip from NY to Boca Raton, 3 days food + lodging; self + spouse	
DNC-Summer Business Roundtable	July 27-29 1990	Roundtrip from NY to Nantucket, 3 days food + lodging, self + dependent child	
Aspen Institute-Summer Conf	Aug 26-30 1990	Roundtrip Airfare, Prague-NY, 5 days food + lodging, self + spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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Reporting Individual's Name
Charles Schumer

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Charles E Schumer	May 15, 1991

GPO: 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 AM 11: 24

F. James Sensenbrenner, Jr.
(Full Name)

N76 W14726 North Point Drive, PO Box 186
(Mailing Address)

Menomonee Falls, Wisconsin 53052-0186

HAND DELIVERED

MC

(Office Use Only) 24

Filer Status	[X] Member of the U S House of Representatives	State Wisconsin District 9	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Rockwell International, Inc. (Jan. 25, 1990)	speech	$2,000	
	TRW, Inc. (Jan. 25, 1990)	speech	2,000	
	National Association of Broadcasters (Apr. 1, 1990)	speech	2,000	
	Council of Scientific Society Presidents (May 9, 1990)	speech	250	
	National Restaurant Association (May 19,1990)	speech	1,000	
	National Cable Television Association (May 21,1990)	speech	1,500	
	Labor Policy Association (Sept. 6, 1990)	speech	2,000	
	Sensenbrenner Family Trust (Trustee fee Dec. 22, 1990)	family	10,000	

For additional earned income, use next page

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Reporting Individual's Name
F. James Sensenbrenner, Jr

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X								X								X								X
	Examples: George Wash Credit Union Accounts			X									X								X						
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	Bank One, Milwaukee, NA				X								X								X						
	Federated Bank, FSB		X										X					X									
S	Bank One, Milwaukee, NA		X										X					X									
JT	Valley Bank, NA		X										X					X									
	FJS, Jr. 1976 Trust						X				X		X									X					
	Sandusky Voting Trust		X								X										X						
	HM McMurtrie Trust					X							X								X						
	Abbott Laboratories stock				X						X									X							
	Ameritech stock		X								X								X								
	Amoco Corp. stock				X						X									X							
	American Tel. & Tel. stock			X							X								X								
	Banc One Corp. stock				X						X									X							

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S DC, JT — Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Bell Atlantic stock		X								X								X							
Bell South stock		X								X								X							
Continental Corp. stock			X							X									X						
Dunn & Bradstreet stock				X						X										X					
E.I. Du Pont stock			X							X								X							
Eastman Kodak stock			X							X									X						
Exxon Corp. stock					X					X											X				
First Interstate Bancorp. stock			X							X									X						
Firstar Corp. stock		X								X								X							
General Electric Corp. stock				X						X									X						
General Mills Co. stock				X						X									X						
General Motors Corp. stock			X							X									X						
Halliburton Corp. stock			X							X								X							
Houston Industries stock			X							X									X						
IBM stock			X							X									X						
Idaho Power stock		X								X									X						
Kellogg Corp. stock				X						X									X						
Kimberly-Clark Corp. stock								X		X												X			
Merck & Co. stock							X			X											X				
Minn. Min. & Mfg. stock			X							X									X						
Monsanto Corp. stock				X						X										X					
Nevada Power Co. stock		X								X								X							
Newell Corp. stock			X							X								X							
NYNEX, Inc. stock		X								X								X							
Ogden Corp. stock			X							X									X						
Pacific Gas & Electric stock		X								X								X							
Pacific Telesis stock		X								X								X							
S Phillip Morris Co. stock					X					X										X					
Premark Intl. stock		X								X							X								
Rank Organisation ADR		X								X							X								

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Minn. Min. & Mfg. stock		X																							
Monsanto Corp. stock		X																							
Pacific Gas & Elect. stock		X																							
Warner Lambert Co. stock		X																							
Wisconsin Energy Corp. stock		X																							
Holdings for which F. James Sensenbrenner, Jr. is trustee																									
Helmsman Prime Fund					X																				
Borden, Inc. stock			X																						
CPC Intl., Inc. stock		X																							
Catellus Dev. Corp. stock	X																								
Centerior Energy Corp. stock		X																							
Chase Manhattan Corp. stock		X																							
First Chicago Corp. stock			X																						
Firstar Corp. stock		X																							
General Motors E stock		X																							
Johnson Controls stock		X																							
Kimberly-Clark Corp. stock								X																	
NCNB Corp. stock		X																							
NCR Corp. stock			X																						
Quantronix Corp. stock	X																								
Santa Fe Energy Resources stock	X																								
Santa Fe Pacific Corp. stock		X																							
Southeast Banking Corp. stock		X																							
Southern Co. stock		X																							
Union Pacific Corp. stock		X																							
Unocal Corp. stock		X																							
Income, holdings and transactions for trusts of which F. James Sensenbrenner, Jr., is co-trustee reported on separate accounting sheets by Bank One, Milwaukee Trust Company																									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Sears Roebuck & Co. stock		X								X								X								
	Southwest Bell stock		X								X								X								
	Tenneco Corp. stock			X							X									X							
	Unisys Co. preferred stock		X								X								X								
S	Universal Foods Corp. stock			X							X								X								
	US West, Inc. stock		X								X								X								
	Warner Lambert Co. stock				X						X									X							
	Wisconsin Energy Corp. stock			X							X								X								
	OMI Corp. stock		X								X							X									
	Ogden Projects Co. stock	X																X									
DC	Kimberly-Clark Corp. (in trust)					X					X										X						
DC	Burke & Herbert Bank CD (in trust)			X									X								X						
DC	Kimberly-Clark stock (in trust)				X						X										X						
DC	Bank One, Milw. CD (in trust)			X									X							X							
DC	Burke & Herbert Bank		X										X					X									
DC	Burke & Herbert Bank	X											X					X									
	Holdings in trust of which F. James Sensenbrenner, Jr. is direct beneficiary																										
	NCNB Daily Income fund			X							X								X								
	US Treasury notes				X																						
	Abbott Laboratories stock				X																						
	Amoco Corp. stock		X																								
	Banc One Corp. stock			X																							
	Continental Corp. stock		X																								
	E.I. Du Pont stock		X																								
	Exxon Corp. stock			X																							
	General Electric Corp. stock			X																							
	Houston Industries stock		X																								
	IBM stock		X																								
	Merck & Co. stock				X																						

Reporting Individual's Name: F. James Sensenbrenner, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Tenneco Corp. stock	X			quarterly div. reinv.	X						
S	Universal Foods stock	X			"	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Sovran Mortgage Corp.	Mortgage on Alexandria, VA residence				X			

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Reporting Individual's Name
F. James Sensenbrenner, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
Milwaukee Brewers	American League pass (not used)	nil.
General Motors, Inc.	Civil War tapes from PBS show	$120

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Rockwell International	Jan 24-25	Air travel DCA-LAX, meals and one night lodging	
TRW, Inc.	Jan 25-26	Air Travel, LAX-DCA, meals and one night's lodging	
National Republican Institute for National Affairs	Mar.16-19	Air Travel, DCA-Berlin, meals and 3 night's lodging.	
National Assoc. of Broadcasters	Apr. 1-2	Air Travel, MKE-ATL,DCA, meals & one night's lodging	
National Defense Council Education Foundation	Apr. 6-13	Air Travel, DCA-Vientiane, means and 3 night's lodging	
Nat'l Restaurant Assoc.	May 18-20	Air Travel, DCA-Chicago, 2 night's lodging, for self & spouse	
Nat'l. Cable TV Associatiob	May 20-21	Air Travel, ORD-ATL-DCA, 1 night's lodging and meals.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
F. James Sensenbrenner, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Trustee	Sensenbrenner Family Trust
Co-Trustee	Separate Trusts established for the benefit of F. James Sensenbrenner, III and Robert Alan Sensenbrenner

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to. future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, § 104 and 18 U.S.C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
F. James Sensenbrenner, Jr.	May 7, 1991

GPO 1[illegible] 37-[illegible]98 (m)

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T ALAN SINSENBRENNER TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111567900

DATE	DESCRIPTION		INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
07/20/90	PURCHASED 07/19/90 HELMSMAN DISCIPLINED EQUITY D THRU AGENT AT 10.4900 SHARES	190.658		2,000.00-	2,000.00
12/06/90	DISTRIBUTED 12/06/90 HELMSMAN DISCIPLINED EQUITY D TRANSFERRED TO 111543000 SHARES	190.658-			2,000.00-
	HELMSMAN INCOME D				
07/20/90	PURCHASED 07/19/90 HELMSMAN INCOME D THRU AGENT AT 9.5100 SHARES	210.305		2,000.00-	2,000.00
12/06/90	DISTRIBUTED 12/06/90 HELMSMAN INCOME D TRANSFERRED TO 111543000 SHARES	210.305-			2,000.00-
	HELMSMAN INCOME EQUITY D				
07/20/90	PURCHASED 07/19/90 HELMSMAN INCOME EQUITY D THRU AGENT AT 11.1900 SHARES	178.731		2,000.00-	2,000.00

RT ALAN SENSENBRENNER TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111567900

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
12/06/90	DISTRIBUTED 12/06/90 HELMSMAN INCOME EQUITY D TRANSFERRED TO 111543000 SHARES 178.731-			2,000.00-
	HELMSMAN LTD VOLATILITY BD D			
11/26/90	PURCHASED 11/15/90 HELMSMAN LTD VOLATILITY BD D THRU AGENT AT 10.1500 SHARES 701.267		7,117.86-	7,117.86
12/06/90	DISTRIBUTED 12/06/90 HELMSMAN LTD VOLATILITY BD D TRANSFERRED TO 111543000 SHARES 701.267-			7,117.86-
	HELMSMAN PRIME FUND D			
00/00/00	8 TRANSACTIONS CONSOLIDATED PURCHASED HELMSMAN PRIME FUND D FACE AMOUNT 10,734.780		10,734.78-	10,734.78
00/00/00	7 TRANSACTIONS CONSOLIDATED SOLD HELMSMAN PRIME FUND D FACE AMOUNT 18,156.970-		18,156.97	18,156.97-
	INTERMEDIATE BOND FUND			

N ALAN GENSENBRENNER TR 12/31/87 THROUGH 12/31/90 ACCOUNT NUMBER 111567900

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
03/08/90	PURCHASED 02/28/90 INTERMEDIATE BOND FUND AT 3.0360 UNITS 640.000		1,999.73-	1,999.73
11/26/90	SOLD 11/15/90 INTERMEDIATE BOND FUND AT 3.1055 UNITS 2,292.000-		7,117.86	6,997.49-
	INCOME STOCK FUND			
03/08/90	PURCHASED 02/28/90 INCOME STOCK FUND AT 22.4810 UNITS 88.000		1,978.33-	1,978.33
12/06/90	DISTRIBUTED 12/06/90 INCOME STOCK FUND TRANSFERRED TO 111543000 UNITS 532.000-			10,464.78-
	DISCIPLINED EQUITY FUND			
03/08/90	PURCHASED 02/28/90 DISCIPLINED EQUITY FUND AT 23.7470 UNITS 84.000		1,994.75-	1,994.75

ACCOUNTING DETAIL

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ERT ALAN SENSENBRENNER TR

12/31/89 THROUGH 12/31/90

ACCOUNT NUMBER 111567900

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
12/06/90	DISTRIBUTED 12/06/90 DISCIPLINED EQUITY FUND TRANSFERRED TO 111543000 UNITS 496.000-			10,455.10-
	TOTAL NET CAPITAL CHANGES	0.00	4,550.62-	29,366.75- P 0.00 I
	TOTAL NET CAPITAL CHANGES	0.00	4,550.62-	29,366.75- P 0.00 I

JAMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST	
11/09/90	COLLECTIVE FUND DISTRIBUTION DISCIPLINED EQUITY FUND .04083033/UNIT ON 10/31/90 ON 496 UNITS	20.25			I
12/03/90	COLLECTIVE FUND DISTRIBUTION DISCIPLINED EQUITY FUND .16079063/UNIT ON 11/30/90 ON 496 UNITS	79.75			I
	TOTAL NET COMMON TRUST FUND INCOME	1,614.23	0.00	0.00 0.00	P I
	TOTAL INCOME RECEIPTS	2,413.24	0.00	0.00 0.00	P I
	NET CAPITAL CHANGES				
	NET CAPITAL CHANGES				
	HELMSMAN DISCIPLINED EQUITY D				
07/20/90	PURCHASED 07/19/90 HELMSMAN DISCIPLINED EQUITY D THRU AGENT AT 10.4900 SHARES 190.658		2,000.00-	2,000.00	
	HELMSMAN INCOME D				

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JAMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
07/20/90	PURCHASED 07/19/90 HELMSMAN INCOME D THRU AGENT AT 9.5100 SHARES 210.305 HELMSMAN INCOME EQUITY D		2,000.00-	2,000.00
07/20/90	PURCHASED 07/19/90 HELMSMAN INCOME EQUITY D THRU AGENT AT 11.1900 SHARES 178.731 HELMSMAN LTD VOLATILITY BD D		2,000.00-	2,000.00
11/26/90	PURCHASED 11/15/90 HELMSMAN LTD VOLATILITY BD D THRU AGENT AT 10.1500 SHARES 701.267 HELMSMAN PRIME FUND D		7,117.86-	7,117.86
00/00/00	10 TRANSACTIONS CONSOLIDATED PURCHASED HELMSMAN PRIME FUND D FACE AMOUNT 7,544.510		7,544.51-	7,544.51

JAMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
00/00/00	4 TRANSACTIONS CONSOLIDATED SOLD HELMSMAN PRIME FUND D FACE AMOUNT 13,943.060- INTERMEDIATE BOND FUND		13,943.06	13,943.06-
01/03/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			7.35
02/08/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			.22-
03/08/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			.67-
03/08/90	PURCHASED 02/20/90 INTERMEDIATE BOND FUND AT 3.0860 UNITS 648.000		1,999.73-	1,999.73
04/05/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			4.98-
05/08/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			9.04-

ANK ONE WISCONSIN TRUST COMPANY, NA

BANK ONE

AMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
06/07/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			1.48-
07/06/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			1.91-
08/08/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			.06-
09/07/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			1.51
10/05/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			.03
11/13/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			2.37-
11/21/90	CHANGED TAX LOT DATA INTERMEDIATE BOND FUND			32.65
11/26/90	SOLD 11/15/90 INTERMEDIATE BOND FUND AT 3.1055 UNITS 2,292.000-		7,117.86	7,006.04-

INCOME STOCK FUND

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JAMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION		INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
02/03/90	CHANGED TAX LOT DATA INCOME STOCK FUND				118.05
03/08/90	PURCHASED 02/28/90 INCOME STOCK FUND AT 22.4810 UNITS	88.000		1,978.33-	1,978.33
07/06/90	CHANGED TAX LOT DATA INCOME STOCK FUND				13.29-
09/07/90	CHANGED TAX LOT DATA INCOME STOCK FUND				43.59
11/13/90	CHANGED TAX LOT DATA INCOME STOCK FUND				101.62-
12/06/90	CHANGED TAX LOT DATA INCOME STOCK FUND				224.85-
	DISCIPLINED EQUITY FUND				
01/03/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND				43.65
03/08/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND				184.05

JAMES SENSENBRENNER III TR 12/31/89 THROUGH 12/31/90 ACCOUNT NUMBER 111542300

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST	
03/08/90	PURCHASED 02/28/90 DISCIPLINED EQUITY FUND AT 23.7470 UNITS 84.000		1,994.75-	1,994.75	
05/08/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			52.09	
06/07/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			59.54-	
09/10/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			456.18-	
10/05/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			208.15-	
11/13/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			80.06-	
12/07/90	CHANGED TAX LOT DATA DISCIPLINED EQUITY FUND			119.02-	
	TOTAL NET CAPITAL CHANGES	0.00	5,574.26-	4,885.61 0.00	P I
	TOTAL NET CAPITAL CHANGES	0.00	5,574.26-	4,885.61 0.00	P I

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F. JAMES SENSENBRENNER, Jr.
NINTH DISTRICT, WISCONSIN
COMMITTEE ON THE JUDICIARY
COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY
SELECT COMMITTEE ON NARCOTICS ABUSE AND CONTROL

WASHINGTON OFFICE
ROOM 2444
RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-4909
202-225-5101

DISTRICT OFFICE
120 BISHOPS WAY
BROOKFIELD, WI 53005-6294
414-784-1111

OUTSIDE MILWAUKEE METRO
CALLING AREA
1-800-242-1119

Congress of the United States
House of Representatives
Washington, DC 20515

FINANCIAL STATEMENT OF F. JAMES SENSENBRENNER, Jr.

Mr. SENSENBRENNER. Mr. Speaker, through the following statement, I am making my financial net worth as of March 31, 1991, a matter of public record. I have filed similar statements for each of the twelve preceding years I have served in the Congress.

ASSETS

REAL PROPERTY	VALUE
Single family residence at 609 Fort Williams Parkway, City of Alexandria, Virginia, at assessed valuation. (Assessed at $651,800.00 Ratio of assessed to market value: 100%.) (Encumbered)	$ 651,800.00
Condominium at N76 W14726 North Point Drive, Village of Menomonee Falls, Waukesha County, Wisconsin, at assessor's estimated market value. (Unencumbered)	73,400.00
Undivided 25/44ths interest in single family residence at N52 W32654 Maple Lane, Village of Chenequa, Waukesha County, Wisconsin, at 25/44ths of assessor's estimated market value of $274,400.00. (Unencumbered)	155,909.09
TOTAL REAL PROPERTY	$ 881,109.09

PERSONAL PROPERYY

COMMON & PREFERRED STOCKS

No. of shares		VALUE
338	Firstar Corp. @$31.375	$ 10,604.75
467.216	American Telephone & Telegraph @$34.25	16,002.15
558	Idaho Power Corp. @$26.625	14,856.75
22	Ogden Projects Corp. @$20.50	451.00

PAGE TWO

No. of shares		VALUE
450	First Interstate Bancorp. @$33.375	15,018.75
146.877	American Information Technologies @$67.00	9,840.76
193.145	Bell Atlantic Corp. @$51.375	9,922.82
218.786	Bell South Corp. @$53.25	11,650.35
100.337	NYNEX, Inc. @$72.50	7,274.43
148	Pacific Telesis, Inc. @$43.00	6,364.00
151.279	Southwest Bell, Inc. @$56.125	8,490.54
199.542	US West, Inc. @$39.125	7,807.08
649.438	Tenneco Corp. @$42.375	27,519.94
580	Nevada Power Co. @$21.50	12,470.00
838	Newell Corp. @$32.00	26,816.00
1440	General Mills, Inc. @$57.00	82,080.00
800	Kellogg Corp. @$93.375	74,700.00
2000	Dunn & Bradstreet, Inc. @$47.00	94,000.00
1000	Halliburton Company @$46.25	46,250.00
18176	Kimberly-Clark Corp. @$87.75	1,594,944.00
500	Minnesota Mining & Manufacturing @$88.50	44,250.00
100	Rank Organisation ADR @$12.625	1,262.50
2132	Exxon Corp. @$58.50	124,722.00
1162	Amoco Corp. @$52.50	61,005.00

PAGE THREE

No. of shares		VALUE
1080	Eastman Kodak Co. @$43.625	47,115.00
1075	General Electric Co. @$69.625	74,846.88
408	General Motors Corp. @$37.75	15,402.00
20	General Motors Corp., Series H @$19.25	385.00
5213	Merck & Co., Inc. @$105.50	549,971.50
952	Warner Lambert Co. @$74.50	70,924.00
700	Continental Corp. @$29.25	20,475.00
200	Sears Roebuck & Co. @$35.00	7,000.00
910	Ogden Corp. @$20.00	18,200.00
455	OMI Corp. @$6.75	3,071.25
418	International Business Machines, Inc. @$113.875	44,599.75
26	Sandusky Voting Trust @$123.00	3,198.00
1422	Monsanto Corporation @$58.00	82,476.00
450	E.I. Du Pont de Nemours Corp. @$37.125	16,706.25
450	Houston Industries, Inc. @$36.125	16,256.25
525	Pacific Gas & Electric, Inc. @$26.125	13,715.63
512	Wisconsin Energy Corp. @$34.25	17,536.00
1800	Abbott Laboratories, Inc. @$48.00	86,400.00
1410	Banc One Corp. @$35.75	50,407.50
127	Premark International, Inc. @$21.75	2,762.25

PAGE FOUR

No. of shares		VALUE
100	Unisys, Inc., Preferred @$10.00	1,000.00
333	Benton County Mining Company @ no value	nil
	TOTAL COMMON & PREFERRED STOCKS	$ 3,450,751.08

LIFE INSURANCE POLICIES

Face amount		Cash surrender value
$12,000	Northwestern Mutual #4378000	$ 20,378.83
$30,000	Northwestern Mutual #4574061	48,597.81
$10,000	Massachusetts Mutual #4116575	4,423.84
$100,000	Massachusetts Mutual #4228344	85,460.47
$175,000	Old Line Life Insurance Co.	16,275.74
	TOTAL LIFE INSURANCE POLICIES	$ 170,136.69

BANK & SAVINGS & LOAN ACCOUNTS

Bank One, Milwaukee, N.A. Checking account no. 0046-2366	$ 7,886.02
Bank One, Milwaukee, N.A. Preferred savings account no. 4158-8070	18,954.54
Bank One, Milwaukee, N.A. Regular savings account no. 497-525	641.40
Sergeant at Arms, U.S. House of Representatives Checking account no. 7484	245.44
Valley Bank, N.A. of Hartland, WI Checking account no. 03056664-06	121.28
Valley Bank of Hartland, WI Savings account no. 03056544-11	539.92
Burke & Herbert Bank of Alexandria, VA Checking account no. 601-301-5	577.37
Federated Bank, FSB of Butler, WI Individual Retirement accounts	32,710.03
TOTAL BANK & SAVINGS & LOAN ACCOUNTS	$ 61,676.00

MISCELLANEOUS

1985 Pontiac 6000 automobile (at Blue Book retail value)	$	3,025.00
Office furniture & equipment (estimated)		1,000.00
Furniture, clothing & personal property (estimated)		125,000.00
Stamp collection (estimated)		28,000.00
Interest in Wisconsin Retirement Fund		34,036.24
Deposits in Congressional Retirement Fund		62,877.93
Value of deposits in Federal Thrift Savings Plan		22,939.47
Traveller's checks		6,650.00
20 foot Manitou pontoon boat & 35 HP Force Outboard motor (estimated)		5,500.00
TOTAL MISCELLANEOUS	$	289,028.64
TOTAL ASSETS	$	4,852,701.50

LIABILITIES

Sovran Mortgage Company of Richmond, VA (Amount due on mortgage on Alexandria, VA residence) Loan #564377	$	175,062.81
Miscellaneous charge accounts (estimated)		2,000.00
TOTAL LIABILITIES	$	177,062.81
NET WORTH	$	4,675,638.69

STATEMENT OF 1990 TAXES PAID

Federal income tax	$	47,441.00
Wisconsin income tax		14,663.00
Menomonee Falls, WI property tax		2,142.00
Chenequa, WI property tax		7,537.00
Alexandria, VA property tax		6,762.00

I further declare that I am trustee of a trust established under the will of my late father, Frank James Sensenbrenner, Sr., for the benefit of my sister, Margaret A. Sensenbrenner, and of my two sons, F. James Sensenbrenner, III and Robert Alan Sensenbrenner. I am further the direct beneficiary of two trusts, but have no control over the assets of either trust. My wife, Cheryl Warren Sensenbrenner, and I are trustees of separate trusts established for the benefit of our sons and also are custodians of accounts established for the benefit of each son under the Uniform Gifts to Minors Act.

Also, I am neither an officer nor a director or any corporation organized under the laws of the State of Wisconsin or of any other state or foreign country.

F. JAMES SENSENBRENNER, Jr., M.C.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3 05

Jose E. Serrano
(Full Name)

910 Grand Concourse
(Mailing Address)

Bronx, New York 10451

Filer Status	[X] Member of the U.S. House of Representatives	State New York District 18th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

HAND DELIVERED
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(Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Monroe Business Institute	Speech	$2000	
	O'Connor + Hannan	Speech	$1000	
	Nat'l Coun. of Educ. Opportunity Assos.	Speech	$1000	
	National Restaurant Association	Speech	$1000	
	Jersey City State College	Speech	$ 400	
	W.A.D.O. Radio	Radio Show Commentary	$1925	
	New York State Assembly	Salary 1-3/90	$16,248	

For additional earned income, use next page

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Reporting Individual's Name
Jose E. Serrano

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE [X]

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								

For additional assets and unearned income, use next page

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Reporting Individual's Name

Jose E. Serrano

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name: Jose E. Serrano

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [ ]

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135
Institute For Puerto Rican Affairs, Inc.	Silk Screen	$ 150
Circulo de Puerto Rico, Washington, D.C.	Frame for Silk Screen	$ 69.67

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
Jose E. Serrano

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Advisory Board Mem.	New York City Transit Authority

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
J E Serrano	5/15/91

GPO 1991 2[illegible]598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 5:29
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only) 5

Philip R. Sharp
(Full Name)

2217 Rayburn Bldg.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: IN District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Aaron Priest Literary Agency 334 E. 51st St., New York, NY 10022	Spouse Royalties	NA	
	Sterling Lord Literary Agency 660 Madison Ave., New York, NY 10021	Spouse Royalties	NA	
	Washington Research Grp.	Speech	$1,000	X
	Executive Enterprises	Speech	$1,000	X

For additional earned income, use next page

4052

Reporting Individual's Name
Philip R. Sharp

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1 000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5 000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1 001)	B $1,001 - $15 000	C $15,001 - $50,000	D $50 001 - $100,000	E $100,001 - $250 000	F $250,001 - $500 000	G $500,001 - $1,000,000	H over $1 000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST*		I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15,001 - $50 000	VII $50,001 - $100,000	VIII $100 001 - $1 000 000	IX over $1 000 000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	House, 2212 Euclid, Muncie, IN			X								X								X						
	Wright Patman Federal Credit Union		X										X					X								
	IRA Accounts (2)			X							X								X							
	U.S. Savings Bond	X															X									
	Farmland, Clark Co., Illinois	I along with my two brothers have a contingent interest in the trust created by my father's will.																								

For additional assets and unearned income, use next page

Reporting Individual's Name

Philip R. Sharp

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
s, dc	VitaChlor Corporate Stock Shares given to myself, spouse and children by mother-in-law				Dec. 1990	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
	Merchants National Bank (Muncie, IN)	Mortgage on 2112 Euclid	x						
	Wright Patman Federal Credit Union	Loan	x						

Reporting Individual's Name
Phillip R. Sharp

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section) aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle 3 days food & lodging self and spouse	
Brooklyn Union Gas Speech and Fact Find Trip		Feb. 23-25 1990	Roundtrip train fare from DC to NY, 2 days lodging, Self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Philip R. Sharp

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Directors	Inst. for Resource Management (Non-profit organization, no compensation is provided)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U.S C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Philip R. Sharp	5/15/91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 5:29

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

HAND DELIVERED
(Clerk Use Only)

5

Philip R. Sharp
(Full Name)

2217 Rayburn Bldg.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: IN District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Aaron Priest Literary Agency 334 E. 51st St., New York, NY 10022	Spouse Royalties	NA	
	Sterling Lord Literary Agency 660 Madison Ave., New York, NY 10021	Spouse Royalties	NA	
	Washington Research Grp.	Speech	$1,000	X
	Executive Enterprises	Speech	$1,000	X

For additional earned income, use next page

4057

Reporting Individual's Name
Philip R. Sharp

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	House, 2212 Euclid, Muncie, IN			X								X									X						
	Wright Patman Federal Credit Union		X										X						X								
	IRA Accounts (2) Putnam High Yeild Trust II			X							X									X							
	U.S. Savings Bond	X																X									
	Farmland, Clark Co., Illinois	I along with my two brothers have a contingent interest in the trust created by my father's will.																									
	VitaChlor Corporate Stock		X								X							X									

PRS 7/1/91

PRS 7/1/91

For additional assets and unearned income, use next page

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Reporting Individual's Name: Philip R. Sharp

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
s, dc	VitaChlor Corporate Stock Shares given to myself, spouse and children by mother-in-law				Dec. 1990	x						

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NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Merchants National Bank (Muncie, IN)	Mortgage on 2112 Euclid	x						
	Wright Patman Federal Credit Union	Loan	x						

Reporting Individual's Name
Phillip R. Sharp

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

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NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

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NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Brooklyn Union Gas Speech and Fact Find Trip	Feb. 23-25 1990	Roundtrip train fare from DC to NY, 2 days lodging, Self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Philip R. Sharp

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Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Directors	Inst. for Resource Management (Non-profit organization, no compensation is provided)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

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TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) — Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because thay meet the three tests for exemption? (See Instructions page 5) — Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978 as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Philip R. Sharp — DATE (Month, Day, Year): 5/15/91

Philip R Sharp 7/1/91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

ICJ MAY 15 PM 5:45
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

The Honorable E. Clay Shaw, Jr.
(Full Name)

2338 Rayburn House Office Building, Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State Florida District 15th	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) (8)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Smokeless Tobacco Council, Palm Beach, FL (1/8/90)	Speech	$1,000.	
	American Trucking Assoc., Ft. Lauderdale, FL (2/13/90)	Speech	$2,000.	
	American Society of Assoc. Executives, Wash., D.C. (3/6/90)	Speech	$2,000.	
	Securities Industry Assoc., Washington, D.C. (3/14/90)	Speech	$2,000.	
	RJR Nabisco, Washington, D.C. (4/24/90)	Speech	$2,000.	
	Society of Independent Gasoline Marketers of Am., Ft.Laud., FL (4/28/90)	Speech	$2,000.	
	Associated Specialty Contractors, Wash., D.C. (4/30/90)	Speech	$1,000.	
	Business Coalition for Fair Competition, Wash., D.C. (6/19/90)	Speech	$1,000.	
	Duffy Wall & Assoc., Wash., D.C. (6/20/90)	Speech	$1,000.	
	CAP-12, Wash., D.C. (8/2/90)	Speech	$ 500.	

For additional earned income, use next page

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Reporting Individual's Name

E. Clay Shaw, Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Assoc. of Broadcasters, Boston, MA (9/14/90)	Speech	$2,000.	
U.S. Tobacco Co., Wash., D.C. (10/10/90)	Speech	$2,000.	
Public Securities Assoc., Boca Raton, FL (10/26/90)	Speech	$2,000.	
Bank Tax Institute, Bal Harbour, FL (12/6/90)	Speech	$1,000.	
A.I.C.P.A., Orlando, FL (12/8/90)	Speech	$2,000.	

Reporting Individual's Name
E. Clay Shaw, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Plant Place, Inc.			X							X										X						
	Dania Farms, Inc.							X			X													X			
	Fort Worth Basin Partnership	X									X							X									
	Attorney's Title Insurance Fund		X															X									
	Indian River West						X							X										X			
	Bay County Bonds		X										X						X								

For additional assets and unearned income, use next page

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: E. Clay Shaw, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	La. HFA			X									X														
	Merrill-Lynch MIT												X									X					
	Florida State Broward County Bonds			X									X														
	Shaw Interstate-Family Partnership-								X			X		X									X				
	--Timberland located in Sumpter Co.,																										
	Ala., Lauderdale Co. and Kemper Co.,																										
	Miss.																										
	Nordstrom Inc. Stock		X								X							X									
	Chevy Dev. Comp. Stock	X																									
	Arvida JMB Partnership			X																X							
	Real Estate-704 N. Federal Highway								X									X									
	Dania, FL (1/3 Interest in 53+																										
	acres)																										

Reporting Individual's Name

E. Clay Shaw, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	MIT 39th (Merrill Lynch)		X		2/28/90		X					
	Giant F Inc.		X		4/6/90	X						
	Wal Mart Stores Inc.		X		4/6/90	X						
	Municipal Investment Trusts		X		9/11/90	X						
	Shaw Farms Partnership--Partnership Dissolved--Assets distributed To Partners				12/90							X

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
E. Clay Shaw, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Far East Studies Institute & the Chinese Peoples Institute of Foreign Affairs & American President Lines	11/18-20/90	Self and spouse air travel from Wash., D.C. to Beijing, 9 days food, lodging & transportation & return from Hong Kong	
Danny Thompson Memorial Golf Tournament	8/22-8/29/90	Self and spouse air travel from Wash., D.C. to Sun Valley, Idaho 5 days food, lodging.	
The Jefferson Educational Foundation	4/6/90-4/17/90	Self and spouse air travel from Wash., D.C. to South Africa. 10 days food and lodging.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

E. Clay Shaw, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	E. Clay Shaw, Trustee (Children's Trust)
Director Director/President	Plant Place, Inc. Dania Farms, Inc.
Partner Director/President	Shaw Interstate Shaw Farms (inactive Corp.)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☐ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☐ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
E. Clay Shaw Jr.	May 15, 1991

GPO 1991 37-558 (m)

E. CLAY SHAW
15TH DISTRICT, FLORIDA

REPLY TO

2338 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3026

DISTRICT OFFICE

1512 EAST BROWARD BOULEVARD
SUITE 101
FORT LAUDERDALE, FL 33301
(305) 522-1800

HAND DELIVERED

RECEIVED MAY 15 PM 5:45

COMMITTEE
WAYS AND MEANS
SUBCOMMITTEES
OVERSIGHT
HUMAN RESOURCES
RANKING MEMBER

Congress of the United States
House of Representatives
Washington, DC 20515

May 15, 1991

The Honorable Louis Stokes
Chairman
Committee on Standards of Official
Conduct
HT-2, The Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

You will notice that many stocks have been deleted from my Financial Disclosure Statement for 1990 which were reported on my Financial Disclosure Statement for 1989 without an explanation. Those stocks belong to my children who are no longer dependent, therefore, not subject to reporting requirements.

Sincerely,

E. Clay Shaw, Jr.
Member of Congress

ECS/mm

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

E. CLAY SHAW
15TH DISTRICT, FLORIDA

REPLY TO

2338 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-3026

DISTRICT OFFICE

1512 EAST BROWARD BOULEVARD
SUITE 101
FORT LAUDERDALE FL 33301
(305) 522-1800

COMMITTEE
WAYS AND MEANS
SUBCOMMITTEES
OVERSIGHT
HUMAN RESOURCES
RANKING MEMBER

Congress of the United States
House of Representatives
Washington, DC 20515

HAND DELIVERED

May 29, 1991

(7)

MC

1991 MAY 31 PM 11:38

The Honorable Louis Stokes
Chairman
Committee on Standards of Official
Conduct
HT-2, The Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

Municipal Inc. Trust is the Merrill-Lynch MIT which was shown on last year's return. Giant Food, Inc. was inadvertently omitted on the 1989 Financial Disclosure form. Please advise if an amendment is required.

The other corrections of my statement are acknowledged and amended accordingly.

Please also note further amendment which was not transcribed and placed on my original filing.

Sincerely,

E. Clay Shaw, Jr.
Member of Congress

ECS/mm
Enclosures

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 31 11:37

The Honorable E. Clay Shaw, Jr.
(Full Name)

2338 Rayburn House Office Building, Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: 15th	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

E. Clay Shaw, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	Plant Place, Inc.					X							X										X							
	Dania Farms, Inc.									X			X													X			
	Fort Worth Basin Partnership			X																X										
	Attorney's Title Insurance Fund				X															X										
	Indian River West, Inc. (a Fla. Corp.)								X							X										X				
	Bay County Bonds				X										X						X									

For additional assets and unearned income, use next page.

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: E. Clay Shaw, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Congressional Federal Credit Union				X								X								X						
	Citizens & Southern Nat. Bank			X									X							X							
	Sun Bank		X										X					X									
	Crestar		X										X						X								
	U.S. House Sergeant at Arms		X																								
	Blockbusters Enter.		X								X							X									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: E. Clay Shaw, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none or less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none or less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
La. HFA (Housing Authority Mun. Bond)			X									X							X						
Merrill-Lynch MIT				X								X									X				
Florida State Broward County Bonds			X									X							X						
Shaw Interstate-Family Partnership-								X			X		X									X			
--Timberland located in Sumpter Co.,																									
Ala., Lauderdale Co. and Kemper Co.,																									
Miss.																									
Nordstrom Inc. Stock		X								X							X								
Chevy Dev. Comp. Stock	X																X								
Arvida JMB Partnership			X							X									X						
Real Estate-704 N. Federal Highway								X									X								
Dania, FL (1/3 Interest in 53+																									
acres)																									

Reporting Individual's Name
E. Clay Shaw, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example:	Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
1. Far East Studies Institute & the Chinese Peoples Inst. of Foreign Affairs.		Nov.11-18,1990	Roundtrip air travel from Wash., D.C. to Beijing 7 days food, lodging and transportation for self and spouse.	
2. American President Lines, Ltd.		Nov.18-20,1990	2 days food, lodging and transportation in Hong Kong for self and spouse.	
3. Danny Thompson Memorial Golf Tournament		Aug.22-25,1990	Self and spouse round-trip air travel from Wash., D.C. to Sun Valley, Idaho, 3 days food, lodging and transportation.*	
4. The Jefferson Education Foundation		Apr.9-16,1990	Self and spouse round-trip air travel from Wash., D.C. to South Africa. 6 days food, lodging, and transportation.	
*3.			(Please note: April 9 and 16 were travel days) *3. Returned 8/29/90 after continuing travel at own expense.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
E. Clay Shaw, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 21, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10:34

U.S. [illegible]

HAND DELIVERED

Christopher Shays
(Full Name)

393 Webbs Hill Road
(Mailing Address)

Stamford, Connecticut 06903

Filer Status	[XX] Member of the U S House of Representatives	State Connecticut District 4	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Board of Education Town of New Canaan	Spouse Salary	N/A	
	Northern Montana College	Spouse Salary	N/A	

For additional earned income, use next page

4077

Reporting Individual's Name

Christopher Shays

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Citicorp Mortgage	X											X					X									

For additional assets and unearned income, use next page

4078

Reporting Individual's Name: Christopher Shays

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Congressional Federal Credit Union	Personal Loan	X						

4079

Reporting Individual's Name: Christopher Shays

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [ ]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors Corporation	Video tapes of PBS documentary "The Civil War"	$170

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

4080

Reporting Individual's Name

Christopher Shays

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Christopher Shays

DATE (Month, Day, Year): May 14, 1991

GPO: 1991 — 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:32
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) (6)

BUD SHUSTER
(Full Name)

Box 234C RD 3, Everett, Pa. 15537
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State Pa. District 9	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Motor Vehicle Equipment Forum, Wash,DC 1/3/90	honorarium	$2,000	
	Ackerly Communications, Wash, DC 1/24/90	honorarium	2,000	
	Bremen Co., Boston, 1/18/90	honorarium	2,000	
	Am. Road Blders Assn, Wash, DC 1/8/90	honorarium	1,500	
	Parsons Co., Los Angeles, 2/20/90	honorarium	2,000	
	Irvine Co., Los Angeles 3/9/90	honorarium	2,000	
	American Trucking Assn, Wash, DC 3/15/90	honorarium	2,000	
	American Concrete Assn, Ft. Myers, Fla 3/19/90	honorarium	2,000	
	American Assn of Railroads, Phoenix, 3/20/90	honorarium	1,000	
	American Public Transit Assn, Wash DC, 3/21/90	honorarium	2,000	
	Associated General Contractors, San Fran. 3/28/90	honorarium	2,000	
	National Truck Stop Operators Assn, Wash DC,4/27/90	honorarium	1,000	
	American Road Blders Assn, Wash DC 5/8/90	honorarium	1,500	
	American Bus Assn , Wash DC, 10/17/90	honorarium	1,850	
	American Bus Assn, San Juan, Puerto Rico 1/9/90	honorarium	2,000	

For additional earned income, use next page

4082

Reporting Individual's Name

BUD SHUSTER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1 000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse any deposits aggregating $5 000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details see Instructions pages 12 14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1 001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash Credit Union Accounts		X									X									X					
			182 Main Street Dover, Delaware			X							X								X							
jt	Shuster Farms									X								farm income						X				
jt	Government Bonds						X							X									X					
	Erie Insurance Co.			X														accident setlmnt					X					
s	Hercules Tire & Rubber Co.					X								X									X					
jt	land, Star Route 5, Everett, Pa.			X											X								X					X
jt	real estate, Arlington, Va.						X						X										X					

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: BUD SHUSTER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
jt	Paine Webber Equity Fund					x					x											x					
jt	U.S. Pension Fund					x												x									
jt	AT&T stock		x								x		x					xx									x
jt	Bandag stock		x								x		x					x		x							x
jt	Chrysler stock		x								x							x									x
jt	Turner stock		x								x							x									x
jt	International Barriers Corp		x								x							x									x
jt	U.S. Air stock		x								x							x									x

Reporting Individual's Name
BUD SHUSTER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
jt	land, Star Route 5, Everett, Pa.		X		7/18/90		X					
jt	AT&T stock		X		7/24/90	X						
jt	Bandag stock		X		7/24/90	X						
jt	Chrysler stock		X		7/24/90	X						
jt	Turner stock		X		7/24/90	X						
jt	International Barrier Corp stock		X		7/24/90	X						
jt	U.S. Air stock		X		7/24/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

4085

Reporting Individual's Name
BUD SHUSTER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example:	Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse food	
American Bus Assn	1/9/90	roundtrip air from Wash DC to San Juan, PR 3days/lodge	
Bremen Co.	1/18/90	rd.trp Wash DC to Boston 1 day food& lodging	
Parson Co.	2/20/90	rd trip Wash DC to Los Angeles, 3 days food, lodging	
Irvine Co.	3/9/90	rd trp Wash DC to Los Angeles 2 days food lodging	
American Concrete Assn	3/19/90	rd trp Wash DC to Ft. Myers, Fla 2 days food lodging	
American Assn Railroads	3/20/90	rd trp Wash DC to Phoenix, 3 days, food lodging	
Associated General Contractors	3/28/90	rd trp, Wash DC to San Francisco, 2 days food, lodging	
American Bus Assn	12/13/90	rd trp WashDC to San Juan P.R. 3 days food, lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
BUD SHUSTER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Owner	Shuster Farms, Everett, Pa.

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Bud Shuster

DATE (Month, Day, Year): May 15, 1990

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 JUN -4 PM 12:34

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

6

MC

(Office Use Only)

BUD SHUSTER
(Full Name)

Box 234C RD 3, Everett, Pa. 15537
(Mailing Address)

Filer Status	[X] Member of the U S House of Representatives	State. Pa. District. 9	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Motor Vehicle Equipment Forum, Wash,DC 1/3/90	honorarium	$2,000	
	Ackerly Communications, Wash, DC 1/24/90	honorarium	2,000	
	Bremen Co., Boston, 1/18/90	honorarium	2,000	
	Am. Road Blders Assn, Wash, DC 1/8/90	honorarium	1,500	
	Parsons Co., Los Angeles, 2/20/90	honorarium	2,000	
	Irvine Co., Los Angeles 3/9/90	honorarium	2,000	
	American Trucking Assn, Wash, DC 3/15/90	honorarium	2,000	
	American Concrete Assn, Ft. Myers, Fla 3/19/90	honorarium	2,000	
	American Assn of Railroads, Phoenix, 3/20/90	honorarium	1,000	
	American Public Transit Assn, Wash DC, 3/21/90	honorarium	2,000	
	Associated General Contractors, San Fran. 3/28/90	honorarium	2,000	
	National Truck Stop Operators Assn, Wash DC,4/27/90	honorarium	1,000	
	American Road Blders Assn, Wash DC 5/8/90	honorarium	1,500	
	American Bus Assn , Wash DC, 10/17/90	honorarium	1,850	
	American Bus Assn, San Juan, Puerto Rico 1/9/90	honorarium	2,000	

For additional earned income, use next page

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Reporting Individual's Name

BUD SHUSTER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In BLOCK B indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	ENTERED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X									X					
	182 Main Street, Dover, Delaware				X							X								X							
jt	Shuster Farms								X								farm income						X				
jt	Government Bonds					X							X										X				
	Erie Insurance Co.		X														accident setlmnt						X				
s	Hercules Tire & Rubber Co.				X								X										X				
jt	land, Star Route 5, Everett, Pa.		X											X									X				
jt	TOWNHOUSE, FAIRLINGTON real estate, Arlington, Va.					X						X											X				

For additional assets and unearned

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: BUD SHUSTER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
jt	Paine Webber Equity Fund					x					x											x					
jt	U.S. Pension Fund					x												x									
jt	AT&T stock		x								x		x					x	x								x
jt	Bandag stock		x								x		x					x		x							x
jt	Chrysler stock		x								x							x									x
jt	Turner stock		x								x							x									x
jt	International Barriers Corp		x								x							x									x
jt	U.S. Air stock		x								x							x									x

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Reporting Individual's Name
BUD SHUSTER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
jt	land, Star Route 5, Everett, Pa.		X		7/18/90		X					
jt	AT&T stock		X		7/24/90	X						
jt	Bandag stock		X		7/24/90	X						
jt	Chrysler stock		X		7/24/90	X						
jt	Turner stock		X		7/24/90	X						
jt	International Barrier Corp stock		X		7/24/90	X						
jt	U.S. Air stock		X		7/24/90	X						
S	Hercules Tire & Rubber Corp Note	X			7/24/90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
BUD SHUSTER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse food	
American Bus Assn 1/10, 1/11	1/9/90	roundtrip air from Wash DC to San Juan, PR 3days/lodge	
Bremen Co.	1/18/90	rd.trp Wash DC to Boston 1 day food& lodging	
Parson Co. 2/21, 2/22	2/20/90	rd trip Wash DC to Los Angeles, 3 days food, lodging	
Irvine Co. 3/10	3/9/90	rd trp Wash DC to Los Angeles 2 days food lodging	
American Concrete Assn 3/18	3/19/90	rd trp Wash DC to Ft. Myers, Fla 2 days food lodging	
American Assn Railroads 3/21, 3/22	3/20/90	rd trp Wash DC to Phoenix, 3 days, food lodging	
Associated General Contractors	3/28/90	rd trp, Wash DC to San Francisco, 2 days food, lodging	
American Bus Assn 12/14/11	12/13/90	rd trp WashDC to San Juan P.R. 3 days food, lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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Reporting Individual's Name

BUD SHUSTER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Owner	Shusterarms, Everett, Pa.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Bud Shuster

DATE (Month, Day, Year): June 5, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 2 17

HAND DELIVERED

Gerry Sikorski
(Full Name)

9367 Otchipwe
(Mailing Address)

Stillwater, MN 55082

Filer Status	[X] Member of the U.S. House of Representatives	State Minnesota District 6th CD	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Psychiatric Association (February 23, 1990)	Honorarium	$2,000	
	Maritime Trades Dept., AFL-CIO (February 15, 1990)	Honorarium	$1,500	
	National Association of Postmasters (March 7, 1990)	Honorarium	$1,000	
	The Brookings Institution (March 9, 1990)	Honorarium	$ 400	
	National Federation of Federal Employees (March 21, 1990)	Honorarium	$1,000	
	National Association of Broadcasters (April 20, 1990)	Honorarium	$2,000	
	American Association of Bioanalysts (May 23, 1990)	Honorarium	$2,000	
	National Cable Television Association (June 15, 1990)	Honorarium	$1,500	
	College of American Pathologists (June 20, 1990)	Honorarium	$1,000	
	American Foreign Service Association (July 9, 1990)	Editorial	$ 100	

For additional earned income, use next page

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Reporting Individual's Name
Gerry Sikorski

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Brotherhood of Maintenance of Way Employees (July 12, 1990)	Honorarium	$2,000	
American Physicial Therapy Association (July 19, 1990)	Honorarium	$2,000	
The Upjohn Company (August 2, 1990)	Honorarium	$2,000	
Chicago Board of Trade (November 29, 1990)	Honorarium	$ 750	
Chicago Mercantile Exchange (November 29, 1990)	Honorarium	$ 750	
U.S. Telephone Association (December 3, 1990)	Honorarium	$1,000	
Fox Television Stations, Inc. (December 5, 1990)	Honorarium	$1,000	
CNA Insurance Companies (December 18, 1990)	Honorarium	$2,000	
American Family Life Insurance Company (December 19, 1990)	Honorarium	$2,000	
American Institute of CPAs (December 27, 1990)	Honorarium	$2,000	
			X $1,150
High Pines Norwich Terriers	Spouse Business	N/A	

Reporting Individual's Name

Gerry Sikorski

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5 000 or less in personal savings accounts; and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X									X
			George Wash Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
JT	Wright Patman Congressional Credit Union			X											X					X										
JT	St. Croix Valley Bank				X										X						X									
JT	217 E Street, SE, Washington, DC								X					X										X						

For additional assets and unearned income, use next page

Reporting Individual's Name: Gerry Sikorski

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Wright Patman Congressional Credit Union	Personal Loan	X						
JT	Wright Patman Congressional Credit Union	Second Mortgage on 217 E Street, SE		X					
JT	Bank One Corporation	Mortgage on 217 E Street, SE				X			

Reporting Individual's Name: Gerry Sikorski

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
American Psychiatric Assn. (Speech)	Feb. 2-5, 1990	Roundtrip Air from Mpls, MN to Orange County, CA; 3 nights food and lodging: self and spouse; ground trans to Dana Point	
Transportation Communications Union (Speech)	Feb. 12-15 1990	3 Nights food and lodging: self and spouse	
Seafarers International Union (Speech)	Feb. 12-18 1990	Air travel from Mpls. MN to Miami/Orlando to Mpls for self; extra days at own expense	
National Association of Broadcasters (Panelist)	Mar 31-Apr 2, 1990	Roundtrip Air from Mpls, MN to Atlanta; 2 nights food and lodging: self and spouse	
Our Childrens Future Project/Collins Center for Public Policy (retreat)	Apr 20-22 1990	Roundtrip Air from Mpls, MN to Ft. Myers, FL; 2 nights food and lodging: self and spouse; ground trans to Captiva Island	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Continued from A-4			
American Association of Bioanalysts (Speech)	May 17-18 1990	Air Travel from Wash, DC to Norfolk/Norfolk to Mpls, MN; 1 night food and lodging: self; ground trans to Virginia Beach	
National Cable Television Assn. (Panelist)	May 20-21 1990	Roundtrip Air from Mpls, MN to Atlanta, GA; 1 night food and lodging: self	
American Physical Therapy Assn. (Speech)	Jun 23-24 1990	Roundtrip Air from Mpls, MN to Orange County, CA; 1 night food and lodging: self; ground trans to Anaheim	
Brotherhood of Maintenance of Way Employees (Speech)	Jul 12-13 1990	Roundtrip Air from Wash, DC to Detroit, MI; 1 night food and lodging: self	
The Wilderness Society Nat'l Conf. on Ancient Forests (fact-finding)	Aug 5-8 1990	Roundtrip Air from Mpls, MN to Portland, OR; 3 nights food and lodging: self and spouse; ground trans to Detroit, OR	
U.S. Telephone Association (Speech)	Nov 15-16 1990	Air Travel from Mpls, MN to Ft. Myers, FL to Orlando, FL; 1 night food and lodging: self; ground trans to Naples, FL	
The Rene Dubos Center for Human Environments, INC (forum panelist)	Nov 16-18 1990	Air Travel from Orlando, FL to Mpls, MN for self	
The Walt Disnev Company (enviro forum panelist)	Nov 16-18 1990	2 nights food and lodging for enviro forum: self and spouse	
GLOBE-U.S./Congressional Institute for the Future	Nov-16-18 1990	Roundtrip Air for spouse from Mpls, MN to Orlando, FL to attend enviro forum with Member	
Chicago Board of Trade/Chicago Mercantile Exchange (Speech)	Nov 29, 1990	Roundtrip Air from Mpls, MN to Chicago, IL jointly paid for Member	
The American Family Life Assurance Company (Speech)	Dec 17 1990	Air Travel by corporate jet from Mpls., MN to Columbus, GA to Wash, DC for Member	

Reporting Individual's Name
Gerry Sikorski

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Member Board of Advisors	Advisory Board, MN Mental Health Advocates Coalition Alliance for the Mentally Ill of Minnesota
Member	Children's Defense Fund-MN Project Advisory Board
Member	"KARE" Eleven Who Care Board of Directors

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Gerry Sikorski	5/14/91

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Norman Sisisky
(Full Name)

2951 South Crater Road
(Mailing Address)

Petersburg, Virginia 23805

Filer Status	[X] Member of the U.S. House of Representatives	State Virginia District 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

Mc (Office Use Only) 41

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

Norman Sisisky

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									1990 Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	Examples: George Wash. Credit Union Accounts			X									X								X						
	Examples: 182 Main Street, Dover, Delaware				X							X								X							
	American International Group Stock										X								X								(1)
	Amoco Corp. Stock										X									X							X
	Anadarko Petroleum Corp. Stock										X								X								X
	Atlantic Richfield Co. Stock										X									X							X
	Baker Hughes Inc. Stock										X								X								X
	Bell Atlantic Corp. Stock										X								X								X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Browning-Ferris Industries Inc. Stock										X								X								X
CAP Cities/ABC Inc. Stock										X							X									X
Centel Corp. Stock										X								X								X
Chemcial Waste Mgmt. Inc. Stock										X								X								(1)
Chubb Corp. Stock										X									X							(1)
Coca Cola Co. Stock					X					X								X								X
Comcast Corp. Class A Special Stock										X							X									X
Comcast Corp. Class A Stock										X							X									X
Contel Corp. Stock										X									X							(1)
Walt Disney Production Stock					X					X							X									(1)
R. R. Donnelley & Sons Stock					X					X								X								X
Federal Home Loan Mortgage Corp. Stock										X								X								X
General Re Corp. Stock			X							X									X							(1)
Johnson & Johnson Stock					X					X								X								(1)
McCaw Celluar Class A Stock										X											X					X

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Minnesota Mining & Manufacturing Stock					X						X								X								X
Pacific Telesis Group Stock											X											X					(1)
Rubbermaid Inc. Stock						X					X								X								X
Southern Union Co. Stock											X										X						X
Student Loan Marketing Assoc. Stock											X								X								(1)
Swiss Helvetia Fund, Inc.											X								X								(1)
Texaco, Inc. Stock											X									X							(1)
Time Warner Inc. Series C Pfd Stock											X										X						X
Waste Mgmt Inc. Stock											X									X							(1)
Royal Dutch Petroleum Co. Stock											X									X							(1)
Smithkline Beecham PLC Stock											X								X								X
U.S. Treasury Bills & Notes					X								X									X					X
Arlington County, VA Bond													X							X							X
Signet Trust - Muni Fund						X							X										X				
Riverside County, CA Asset Leasing Corp. Bond													X								X						X

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																									
Wilmington Delaware Parking Auth. Bond												X							X						X
Albany, NY Muni Water Fin Auth. Bond												X						X							X
General Re Corp. Stock													X								X				X
Pacific Telesis Group Stock													X						X						X
Bell Atlantic Corp. Stock													X								X				X
American Int'l Group Stock													X								X				X
Circus Circus Entertainment Inc. Stock													X							X					X
Johnson & Johnson Stock													X					X							X
LIN Broadcasting Corp. Stock													X							X					X
General Re Corp. Stock													X							X					X
Student Loan Marketing Assoc. Stock													X								X				X
American Int'l Group Stock													X							X					X
Chubb Corp. Stock													X								X				X
General Re Corp. Stock													X							X					X
Chubb Corp. Stock													X								X				X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	General Re Corp. Stock													X							X						X
	Chubb Corp. Stock													X									X				X
	American Int'l Group Stock													X							X						X
	General Re Corp Stock													X								X					X
	Walt Disney Productions Stock													X						X							X
	Student Loan Marketing Assoc. Stock													X								X					X
	Pacific Telesis Group Stock													X								X					X
	American International Group Stock													X							X						X
	General Re Corp. Stock													X								X					X
	Student Loan Marketing Assoc. Stock													X								X					X
	Metro Mobile Centers Inc/Class A Stock													X								X					X
	Waste Mgmt. Inc. Stock													X								X					X
	Pacific Telesis Group Stock													X								X					X
	Circus Circus Ent. Inc. Stock													X								X					X
	Toys R Us Stock													X								X					X

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Pacific Telesis Group Stock													X									X				X
	Toys R Us Stock													X								X					X
	Student Loan Marketing Assoc. Stock													X								X					X
	Waste Mgmt. Inc. Stock													X								X					X
	Circus Circus Ent. Inc. Stock													X								X					X
	American Int'l Group Stock													X								X					X
	Contel Corp. Stock													X				X									X
	Anadarko Petroleum Corp. Stock													X								X					X
	Atlantic Richfield Co. Stock													X								X					X
	CAP Cities/ABC Inc. Stock													X									X				X
	Chemical Waste Mgmt. Inc. Stock													X								X					X
	Pacific Telesis Group Stock													X									X				X
	Royal Dutch Petroleum Co. Stock													X						X							X
	Swiss Helvetia Fund, Inc. Stock													X									X				X
	Texaco Inc. Stock													X								X					X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Waste Mgmt, Inc. Stock													X								X				X
	Abbott Labs Stock					X																				X
	Bristol Myers Squibb Co. Stock					X																				X
	General Re Corp. Stock			X																						X
	Heinz (HJ) Co. Stock					X																				X
	Intel Corp. Stock					X																				X
	Marsh & McLennan Stock					X																				X
	Melville Corp. Stock					X																				X
	Merck & Co. Inc. Stock					X																				X
	Pepsico Inc. Stock					X																				X
	State Street Bank of Boston Stock					X																				X
	Toys R Us Stock					X																				X
	Wal-Mart Stores Stock					X																				X
	K-Mart Corp. Stock				X														X							X
	Helvetia Fund Stock				X									X									X			X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Abbott Labs Stock					X					X									X					(1)
	Aerobox Inc. Stock										X							X							(1)
	American Int'l Group Stock				X						X						X								(1)
	AT&T Co. Stock			X							X							X							(1)
	Apple Computer Inc. Stock										X							X							(1)
	Bell Atlantic Corp. Stock				X						X								X						
	C&S Sovran Corp. Stock			X							X							X							X
	CAP Cities/ABC Inc. Stock				X						X						X								
	Chesapeake Corp. Stock				X						X									X					
	Circuit City Stores, Inc. Stock				X						X						X								(1)
	C&S Corp. GA Stock										X							X							X
	Coca Cola Co. Stock					X					X									X					
	Community Psychiatric Centers Stock										X							X							(1)
	Cooper Industries Inc. Stock				X						X								X						
	Walt Disney Co. Stock			X							X						X								(1)

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Eastman Kodak Co. Stock										X									X						(1)
	Ethyl Corp. Stock				X						X											X				
	Federal Nat'l Mortgage Assoc. Stock				X						X									X						
	First Union Corp. Stock										X									X						(1)
	General Electric Corp. Stock					X					X										X					
	Genuine Parts Co. Stock										X								X							(1)
	Halliburton Co. Stock			X							X								X							
	Int'l Business Machines Stock				X						X									X						
	McDonalds Corp. Stock				X						X								X							
	Merck & Co. Inc. Stock				X						X									X						
	Mobil Corp. Stock				X						X										X					
	NICOR Stock				X						X										X					
	Norfolk Southern Corp. Stock			X							X								X							(1)
	Pacific Enterprises Stock										X										X					(1)
	Pacific Telesis Group Stock			X							X									X						

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1 001)	B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1 000	II $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15 000	VI $15 001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	
	Pitney Bowes Inc. Stock										X									X						(1)
	Quanex Corp. Stock			X							X									X						
	Schlumberger Ltd. Stock					X					X									X						
	Signet Banking Corp. Stock			X							X									X						(1)
	Sovran Financial Corp. Stock										X										X					X
	Tandy Corp. Stock										X							X								(1)
	United Dominion Realty TR Inc. SBI				X						X											X				
	United Telecommunications, Inc. Stock			X							X								X							(1)
	Wal-Mart Stores Stock				X						X								X							
	U.S. Treasury Notes							X					X								X					(1)
	Alexandria VA Redev & Hsg Auth Bonds					X							X										X			
	Chesapeake VA Hsp Auth Bonds					X							X									X				
	Eastern VA Med Auth Gen Rev Bonds					X							X										X			
	Fairfax Cnty VA Redev & Hsg Bonds						X						X											X		
	Harrisonburg VA Redev & Hsg Bonds				X								X								X					

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Penninsula Ports Auth Va Hosp Bonds						X							X									X					
Richmond VA Indl Dev Auth Rev Bonds						X							X									X					
Russell Cnty VA Indl Dev Auth Bonds													X										X				X
University VA Hosp Revs Bonds						X							X									X					
Va Beach VA Bonds						X							X									X					
Va Beach VA Dev Auth Rev Bonds					X								X									X					
Va Ed Ln Auth Gtd Student Bonds						X							X									X					
Va St Hsg Dev Auth Bonds						X							X									X					
Va St Transn Brd Trans Bonds							X						X										X				
Winchester Va Dev Auth Bonds							X						X										X				X
Signet Trust-Muni Fund (Temp Inv)							X						X											X			
Abbott Labs Stock					X									X								X					X
Apple Computer Inc. Stock					X									X							X						X
Aerovox Inc. Stock	X													X				X									X
Eastman Kodak Co. Stock					X									X							X						X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Congressional Fed Credit Union Cash Deposits						X							X								X					
Metropolitan Life Interest-Bearing Account			X										X				X									
Northwestern Mutual Life Insurance Co. Interest-Bearing Account				X									X						X							
Signet Bank Cash Accounts (includes IRA account)						X							X								X					
U.S. Treasury Bill													X							X						X
Va First Savings Bank CD													X							X						
State Bank of the Alleghanies	Stock		X							X (3)	X							X								
Pepsico Inc.	Stock								X		X											X				
Doughties Foods Inc.	Stock		X								X						X									
Citicorp	Stock		X								X							X								X
U.S. Treasury Notes & Bills							X						X									X				
Advest CRA Money Market				X									X						X							
Advest Bank CD													X							X						
Ladd Furniture Inc.	Stock			X							X							X								
Archer Daniels Midland Co.	Stock			X							X						X									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Halliburton Co. Stock			X								X							X									
LDC Distributing, Inc. (6)									X	X(2)							"S" Corp Income							X			
New Dominion Limited Partnership (7)									X	X(2)							Partnership Income							X			
Improved Real Estate, Prince George Co., VA (appr. 4 acres)									X	X(4)		X												X			
Improved Real Estate, Blackstone, VA					X					X(4)		X									X						
NCR Stock				X							X								X								
Sini Associates Ltd.				X						X(2)								X									
Anheuser Busch Stock						X					X										X						
Compaq Computer Corp Stock					X																						X
The Berkeley Venture (5)			X							X(2)							Joint Venture Income						X				X
Lee Distributing Company, Inc. Employees' Pension Plan							X			X(9)								X									
Virginia Retirement System				X						X(9)								X									

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	(Interest of Member in listed items re: his interest in New Dominion Limited Partnership)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Zweig Strategy Fund			X							X									X							
	Cadberry Scweppes PLC Stock		X								X								X								
	Signet Banking Corp. Stock			X							X								X								X
	Browning Ferris Industries Inc. Stock		X								X							X									X
	Whitman Corp. Stock					X					X											X					X
	Benham Capital Presentation Cash Fund		X								X								X								
	Benham-Certified Metals Fund			X														X									X
	RF&P Corp. Stock		X								X								X								
	Pepsi Co Inc. Stock				X													X									
	Philip Morris Co., Inc. Stock			X							X							X									X
	Puritan Bennett Corp. Stock			X							X							X									
	Digital Equipment Corp. Stock			X														X									
	Merrill Lynch & Co. Inc. Stock			X							X								X								X
	Dominion Bankshares Corp. Stock		X								X								X								
	Crestar Financial Corp. Stock		X								X									X							

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	(Interest of Member in listed items re: his interest in New Dominion Limited Partnership)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	First Virginia Bank Inc. Stock			X							X								X								
	Riggs National Corp Stock		X								X									X							
	United Telecommunications Inc. Stock			X							X								X								X
	Israel Bonds		X										X					X									
	Bristol Myers Squibb Co. Stock			X							X								X								X
	Wal-Mart Stores Inc. Stock		X															X									X
	Time Warner Inc. Stock			X							X								X								
	Auto Data Proc Stock			X														X									X
	Waban Inc. Stock		X															X									
	Salomon Brothers Fund Inc. Stock			X														X									X
	S&K Famous Brands Inc. Stock		X															X									X
	Ethyl Corp Stock		X															X									X
	Bank America Corp. Stock			X														X									X
	Federal Mogal Corp Stock		X								X								X								
	Barnett Banks Inc. Stock		X															X									X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	(Interest of Member in listed items re: his interest in New Dominion Limited Partnership)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Mead Corp. Stock		X															X									X
	Bank One Corp Stock		X															X									X
	Champion Int'l Corp Stock		X								X								X								
	Dow Chemical Co. Stock			X							X									X							
	AT&T Co. Stock			X							X									X							
	Wells Fargo & Co. Stock		X															X									X
	Rubbermaid Inc. Stock		X								X							X									X
	Emerson Electric Co. Stock			X							X								X								X
	R.R. Donnelley & Sons Stock		X								X							X									X
	AMR Corp Del Stock		X															X									
	Lumex Inc. Stock		X								X							X									X
	Citicorp Stock			X							X								X								X
	Shawmut Nat'l Corp. Stock		X								X								X								
	Paramount Communications Inc. Stock			X							X								X								X
	Federal Home Loan Bank Bond					X							X								X						

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	(Interest of Member in listed items re: his interest in New Dominion Limited Partnership)																									
Ford Motor Credit Co.	Bond		X										X						X							
U.S. Treasury obligations								X					X										X			X
Citizen & Southern Corp. GA	Bond			X														X								X
Loews Corp	Stock			X							X			X				X		X						X
ESCO Electronics Corp	Stock	X																X								X
Knight Ridder Inc.	Stock		X								X							X								X
Adobe Systems Inc.	Stock			X							X							X								X
Markel Corp	Stock			X														X								X
Federal Home Loan Banks	Bonds												X	X							X	X				X
Bally Manufacturing Corp.	Stock		X								X							X								X
Abbott Labs	Stock			X														X								X
Polar Fund, Ltd - Limited Partnership						X											Partnership Income				X					X
The Balanced Spread Fund Limited Partnership				X														X								X
Places Dome Inc.	Stock		X								X							X								X
Columbus Avenue Equity Partners, Ltd						X												X								

Reporting Individual's Name: Norman Sisisky

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	(Interest of Member in listed items re: his interest in New Dominion Limited Partnership)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Las Gaviotas Shopping Center, Virginia Beach, VA (tenancy-in-common)			X													Venture Gross Income						X				
	Signet BAnk/VA B.A.												X								X						X
	Signet BAnk Select Money Market							X					X											X			
	Estate of Celia S. Brown - Advance				X																						X
	Spectrum Resources Stock	X																X									
	Note Receivable - Metropolitan Bottling Company, Inc.												X	X								X			X		X
	Cash Value of Life Insurance Policies							X									Increase over premiums paid						X				
	Baker Hughes Stock										X			X				X			X						X
	Lyondell Petro Chemical Co. Stock										X			X					X X								X
	General Cinema Stock										X							X									X
	Heilig Meyers Co. Stock										X			X				X	X								X
	N.L. Industries Stock										X							X									X
	Washington Ban Corporation Stock										X							X									X
	Pfizer Inc. Stock										X			X				X	X								X
	Smithkline Beecham PLC Stock										X							X									X

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S. DC. JT (Interest of Member in listed items re: his interest in New Dominion Limited Partnership)																									
Citizens & Southern Bond Interest Purchased Stock	X																X								X
J.P. Industries Inc. Stock													X						X						X
Lotus Develop Stock													X						X						X
Va First Sav FSB Stock																	X								X
Harnischfeger Ind. Stock													X						X						X
Browning-Ferris Ind. Stock													X							X					X
Auto Data Proc Stock													X						X						X
Grand Metro PLC ADR Stock													X						X						X
Adobe Systems Stock													X						X						X
Waste Mgmt Stock													X							X					X
U.S. Treasury Note													X						X						X
McCaw Cellular Comm Stock													X						X						X
Toys R Us Stock													X						X						X

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NORMAN SISISKY

NOTES TO ACCOMPANY PARTS II AND III

(1) See transaction(s) listed separately within Part II and III.

(2) Not publicly held - based on book value at year-end.

(3) Based on data furnished by the issuer.

(4) Based on assessed value.

(5) Represents 20.72% equity interest in the joint venture, a real estate investment/development company, having its principal place of business in the City of Newport News, Virginia, the assets of which consist of:

Cash, Bank of Southside Virginia
Notes receivable:
Knollwood Corporation
H. W. Roberson Co., Inc.
Interest receivable
Real estate - 14.49 acres, City of Petersburg, Virginia

(6) LDC Distributing, Inc. is a Virginia Corporation having its principal place of business in Prince George County, Virginia. At December 31, 1990, the assets of LDC Distributing, Inc. consisted of cash (Signet Bank), a note receivable from Mark B. Sisisky and prepaid expenses.

(7) Represents 45.76% interest in a Virginia Limited Partnership having its principal place of business at 1990 E. Whitehill Road, Prince George, Virginia, the assets of which consist of:

Cash and cash equivalents
Cash value of various life insurance policies
Advance, Estate of Celia S. Brown
Bonds, common stocks and funds
Tenancy-in-common interest, Las Gaviotas Shopping Center
Partnership interest, Columbus Avenue Equity Partners

Assets, items of income and transactions reported herein which pertain to such partnerships are so identified in Parts II, III and IV.

(8) Parts II and III exclude any data with respect to holdings of member and his spouse as executors and/or trustees under the wills of Isadore Brown, deceased, and Celia Brown, deceased.

NOTES TO ACCOMPANY PARTS II AND III, Continued

(9) As previously reported, the Member is a vested participant in a qualified pension plan (Lee Distributing Company, Inc. Employees' Pension Plan) previously sponsored by former employees. Under this plan, the employees made contributions to a qualified pension trust, based generally on participants' compensation. Because the Member, prior to 1985, ceased to be an employee of any contributing employer, no future contributions to such pension plan on behalf of the Member are anticipated.

The Member, through prior service as a member of the Virginia House of Delegates, is entitled to receive, beginning at age 65, a retirement benefit from the Virginia Retirement System. In each instance, the category of value is based on the latest available actuarial data.

Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Schedule											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	New Dominion Limited Partnership	Advance						X	

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Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Common stock unless otherwise indicated.											
	Circuit City Stores Inc.	X			1-05-90		X					
	Federal National Mtge Assn Wts	X			1-05-90		X					
	Walt Disney Co.	X			1-04-90		X					
	Exchange of C&S Corp shares for C&S Sovran shares			X	8-31-90		X					
	Russell County, VA IDA Bonds		X		12-17-90				X			
	Citicorp	X			7-13-90	X						
	U.S. Treasury Bill		X		4-12-90			X				
	Sovran Financial Corp.	X			7-13-90	X						
	C&S Sovran	X			11-08-90	X						

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Reporting Individual's Name

Norman Sisisky

PART IV—TRANSACTIONS

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		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO. DAY. YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Apple Computer Inc.		X		3-19-90			X				
	United Telecommunications Inc.	X			3-21-90		X					
	Pacific Enterprises	X			3-21-90		X					
	Abbott Labs		X		3-22-90			X				
	Tandy Corp		X		3-22-90		X					
	Genuine Parts Co	X			4-19-90		X					
	AT&T Co.	X			6-15-90		X					
	Citizens & Southern Corp.	X			6-18-90		X					
	Sovran Financial Corp.		X		6-18-90			X				
	United Telecommunications Inc.	X			7-20-90		X					
	American International Group	X			7-31-90		X					
	Pitney Bowes Inc.	X			7-31-90		X					
	AT&T Co.	X			7-31-90		X					
	Signet Banking Corp.		X		7-31-90		X					
	Community Psychiatric Centers		X		8-03-90			X				
	Eastman Kodak Co.		X		8-03-90			X				
	Norfolk Southern Corp.	X			8-08-90		X					
	Walt Disney Co.	X			8-08-90		X					
	United Telecommunications, Inc.		X		8-29-90		X					

Reporting Individual's Name

Norman Sisisky

PART IV—TRANSACTIONS

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Citizens & Southern Corp. GA	X			8-30-90	X						
American International Group	X			8-30-90	X						
First Union Corp.		X		8-30-90		X					
Pitney Bowes, Inc.		X		9-21-90		X					
U.S. Treasury Notes	X			9-28-90					X		
Genuine Parts Co.		X		9-28-90		X					
U.S. Treasury Notes	X			10-19-90				X			
Pacific Enterprises		X		10-19-90		X					
Circuit City Stores Inc.	X			11-09-90		X					
Winchester Va 6.85% bond 10-15-06/97	X			12-10-90				X			
Contel Corp	X			1-03-90		X					
Browing-Ferris Industries Inc.	X			1-03-90		X					
Smithkline Beecham PLC	X			1-05-90			X				
LIN Broadcasting Corp.	X			1-12-90	X						
Smithkline Beecham PLC	X			1-10-90			X				
Albany, NY Muni Water Fin Auth 7% Bonds 12/01/98		X		1-19-90		X					
Time Warner Inc. Ser C Pfd	X			1-19-90		X					
Time Warner Inc. Ser C Pfd	X			1-22-90	X						
Time Warner Inc. Ser C Pfd	X			1-23-90	X						

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Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

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	Anadarko Petroleum Corp.	X			2-14-90		X					
	Amoco Corp	X			2-14-90		X					
	Atlantic Richfield Co.	X			2-14-90		X					
	Baker Hughes Inc.	X			2-14-90		X					
	American Int'l Group		X		2-14-90		X					
	Student Loan Marketing Assoc.		X		2-14-90		X					
	General Re Corp.		X		2-14-90		X					
	Pacific Telesis Group		X		2-14-90	X						
	Bell Atlantic Corp.		X		2-14-90			X				
	Anadarko Petroleum Corp.	X			3-07-90		X					
	Amoco Corp.	X			3-07-90		X					
	General Re Corp.		X		3-07-90		X					
	American International Group		X		3-07-90		X					
	Circus Circus Ent Inc		X		3-08-90		X					
	Johnson & Johnson		X		3-08-90			X				
	LIN Broadcasting Corp.		X		3-02-90			X				
	Amoco Corp.	X			3-30-90	X						
	Baker Hughes Inc.	X			3-30-90		X					
	Atlantic Richfield Co.	X			3-30-90		X					

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Reporting Individual's Name

Norman Sisisky

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	Anadarko Petroleum Corp.	X			3-30-90		X					
	Student Loan Marketing Assoc.		X		3-30-90		X					
	American Int'l Group		X		3-30-90		X					
	Chubb Corp.		X		3-30-90		X					
	Fed Nat'l Mortgage Assoc.		X		3-30-90	X						
	General Re Corp		X		3-30-90		X					
	Fed Home Loan Mtg Corp		X		4-19-90		X					
	Fed Nat'l Mortgage Assoc wts.		X		4-19-90	X						
	Chubb Corp.		X		4-19-90		X					
	Student Ln Marketing Assn		X		4-24-90		X					
	Fed Home Loan Mtg Corp		X		4-24-90			X				
	General Re Corp		X		4-24-90		X					
	Chubb Corp.		X		4-24-90			X				
	American Int'l Group		X		4-27-90		X					
	General Re Corp		X		4-27-90		X					
	Smithkline Beecham PLC		X		4-27-90			X				
	Walt Disney Co.		X		5-08-90		X					
	Royal Dutch Petroleum Co	X			6-13-90		X					
	Royal Dutch Petroleum Co	X			6-15-90		X					

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Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

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	Texaco Inc	X			6-15-90		X					
	Student Loan Marketing Assn		X		6-15-90		X					
	Pacific Telesis Group		X		6-15-90		X					
	American Int'l Group		X		6-15-90	X						
	General Re Corp		X		6-15-90		X					
	Baker Hughes Inc		X		6-27-90		X					
	Comcast Corp Class A Special		X		7-30-90		X					
	Comcast Corp Class A		X		7-30-90		X					
	Metro Mobile Centers Inc Class B		X		7-30-90		X					
	McCaw Cellular Communications Class A		X		7-30-90		X					
	Waste Mgmt Inc.		X		7-30-90		X					
	Pacific Telesis Group		X		7-30-90		X					
	Circus Circus Ent Inc		X		7-30-90		X					
	Toys R Us		X		8-02-90		X					
	Pacific Telesis Group		X		8-02-90			X				
	Toys R Us		X		8-07-90		X					
	Student Loan Marketing Assn		X		8-07-90		X					
	Metro Mobile Centers Inc Class A		X		8-07-90	X						
	LIN Broadcasting Corp		X		8-07-90		X					

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Reporting Individual's Name

Norman Sisisky

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	Browning Ferris Industries Inc		X		8-07-90		X					
	Metro Mobile Centers Inc Class A		X		8-08-90	X						
	Student Loan Marketing Assn		X		8-14-90		X					
	Waste Mgmt Inc.		X		8-16-90		X					
	Arlington County, Va 6.1% notes 8-15-92	X			8-07-90				X			
	Circus Circus Ent Inc		X		9-05-90		X					
	Halliburton Co	X			9-05-90		X					
	Centel Corp		X		9-14-90		X					
	American Int'l Group		X		9-14-90		X					
	Contel Corp		X		9-14-90			X				
	U.S. Treasury Bills	X			9-20-90				X			
	U.S. Treasury Bills	X			9-20-90					X		
	Amoco Corp		X		11-02-90			X				
	Anadarko Petroleum Corp		X		11-02-90			X				
	Atlantic Richfield Co		X		11-02-90			X				
	Browning-Ferris Industries Inc		X		11-02-90		X					
	Baker Hughes Inc		X		11-02-90		X					
	CAP Cities/ABC Inc		X		11-02-90				X			
	Chemical Waste Mgmt Inc		X		11-02-90			X				

Reporting Individual's Name

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	Halliburton Co.		X		11-02-90		X					
	Pacific Telesis Group		X		11-02-90			X				
	Southern Union Co.		X		11-02-90	X						
	Royal Dutch Petroleum Co.		X		11-02-90			X				
	Helvetia Fund Inc.		X		11-02-90			X				
	Texaco Inc.		X		11-02-90			X				
	Time Warner Inc. Series C Pfd		X		11-02-90		X					
	Waste Management Inc.		X		11-02-90			X				
	Abbott Labs	X			11-02-90			X				
	Coca Cola Co.	X			11-02-90			X				
	Walt Disney Co.	X			11-02-90			X				
	R. R. Donnelley & Sons	X			11-02-90				X			
	Heinz Co.	X			11-02-90			X				
	Johnson & Johnson	X			11-02-90				X			
	Intel Corp.	X			11-02-90				X			
	Marsh & McLennan	X			11-02-90				X			
	Melville Corp.	X			11-02-90			X				
	Minnesota Mining & Manufacturing	X			11-02-90			X				
	Merck & Co., Inc.	X			11-02-90				X			

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Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

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	Pepsico Inc.	X			11-02-90				X			
	Rubbermaid Inc.	X			11-02-90			X				
	St Street Bank of Boston	X			11-02-90				X			
	Toys R Us	X			11-02-90				X			
	Wal-Mart Stores	X			11-02-90				X			
	Arlington County Va 6.1% notes 8-15-92		X		11-05-90			X				
	Wilmington Delaware Parking Auth. 7.15% bond 8-1-06/96		X		11-05-90		X					
	Riverside County, CA Asset Leasing Corp 7.2% notes 6-1-10/99		X		11-05-90		X					
	Minnesota Mining & Manufacturing	X			11-09-90	X						
	Marsh & McLennan	X			11-09-90		X					
	Johnson & Johnson	X			11-09-90	X						
	Walt Disney Co.	X			11-09-90		X					
	Abbott Labs	X			11-09-90		X					
	U.S. Treasury Bills		X		12-04-90				X			
	Bristol Myers Squibb Co.	X			11-30-90			X				
	Bristol Myers Squibb Co.	X			12-03-90			X				
	Toys R Us		X		12-06-90		X					
	U.S. Treasury Bills		X		12-18-90		X					
	Pepsico Inc.	X			12-13-90		X					

Reporting Individual's Name

Norman Sisisky

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	Johnson & Johnson	X			12-13-90		X					
	Bristol Myers Squibb Co.	X			12-13-90		X					
	Coca Cola Co.	X			12-13-90			X				
	Berkeley Venture (Distribution)		X		Various 1990			X				
	K-Mart Corp.		X		01-05-90			X				
	Heintz Co.	X			12-13-90		X					

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Reporting Individual's Name
Norman Sisisky

PART IV – TRANSACTIONS

(Interest therein of Member through his New Dominion Limited Partnership holdings)

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	Federal Home Loan Bank Cons Bond 9.25%		X		01-25-90				X			
	General Cinema Corp.		X		01-24-90		X					
	Lotus Dev Corp.		X		01-03-90	X						
	Pfizer Inc.		X		02-12-90		X					
	Washington Bancorporation		X		02-15-90		X					
	Lyondell Petrochemical Co.		X		02-12-90	X						
	Helig Meyers Co		X		03-06-90	X						
	Lotus Dev Co.		X		02-27-90		X					
	J.P. Industries		X		04-04-90		X					
	Signet Bank/Va Bankers Acceptance		X		05-30-90				X			
	Smith-Kline-Beecham PLC ARD		X		05-10-90		X					
	Shawmut Nat'l Corp		X		06-04-90	X						
	Loews Corp.		X		06-04-90		X					
	Harnischfeger Industries		X		06-04-90		X					
	Browning-Ferris Industries		X		06-04-90	X						
	Baker Hughes Inc.		X		06-04-90		X					
	Auto Data Proc		X		06-04-90	X						
	Grand MET PLC Sponsored ADR		X		06-12-90	X						
	ADOBE System Inc.		X		06-14-90		X					

Reporting Individual's Name: Norman Sisisky

PART IV – TRANSACTIONS

(Interest therein of Member through his New Dominion Limited Partnership holdings)

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	Waste Mgmt Inc.		X		06-04-90	X						
	NL Industries		X		08-15-90	X						
	Waste Mgmt Inc.		X		10-23-90		X					
	United States Treasury notes		X		10-31-90				X			
	VA First SVGS FSB		X		11-09-90		X					
	McCaw Celluar Communications		X		11-20-90	X						
	Waste Mgmt Inc.		X		11-28-90		X					
	Toys R Us		X		12-12-90	X						
	Fed Farm Credit Bank		X		03-27-90					X		
	Fed Farm Credit Bank		X		04-06-90					X		

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Reporting Individual's Name

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PART IV—TRANSACTIONS

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	Signet Bank/Va Bankers Acceptance	X			03-01-90					X		
	Lotus Development Corp.	X			01-08-90		X					
	Smith-Kline-Beecham	X			02-21-90		X					
	Loews Corp.	X			05-30-90			X				
	Harnischfeger Industries	X			05-30-90		X					
	Browning-Ferris Industries	X			01-22-90		X					
	Baker Hughes Inc.	X			03-26-90	X						
	Auto Data Proc	X			04-27-90	X						
	Grand MET PLC Sponsored ADR	X			05-02-90	X						
	ABODE System Inc.	X			05-31-90			X				
	Waste Mgmt Inc.	X			03-16-90		X					
	Waste Mgmt Inc.	X			10-12-90		X					
	McCaw Cellular Communications Class A	X			10-12-90	X						
	Waste Mgmt Inc.	X			11-07-90		X					
	Toys R Us	X			10-12-90	X						
	Signet Bank	X			01-25-90		X					
	Signet Bank	X			07-10-90	X						
	Signet Bank	X			11-05-90	X						
	Browning Ferris Industries	X			10-19-90	X						

Reporting Individual's Name

Norman Sisisky

PART IV – TRANSACTIONS

(Interest therein of Member through his New Dominion Limited Partnership holdings)

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	Whitman Corp.	X			07-05-90		X					
	Whitman Corp.	X			05-03-90		X					
	Pepsi Co.	X			12-13-90			X				
	Philip Morris	X			08-10-90		X					
	Merrill Lynch & Co Inc.	X			04-25-90	X						
	Merrill Lynch & Co. Inc.	X			06-26-90	X						
	United Telecommunications	X			08-09-90		X					
	Bristol Myers	X			02-15-90	X						
	Wal-Mart	X			10-19-90	X						
	Auto Data	X			10-19-90		X					
	Salomon Bros Fd Inc.	X			12-20-90		X					
	S&K	X			02-28-90	X						
	Ethyl Corp.	X			11-09-90	X						
	S&K	X			11-28-90	X						
	J.P. Industries	X			01-02-90	X						
	Bank America	X			12-13-90	X						
	Barnett Bks	X			12-13-90	X						
	Mead Corp.	X			11-07-90	X						
	Banc One Corp.	X			12-13-90	X						

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Reporting Individual's Name

Norman Sisisky

PART IV—TRANSACTIONS

(Interest therein of Member through his New Dominion Limited Partnership holdings)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

(Common stock unless otherwise indicated)

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO. DAY. YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Wells Fargo	X			12-14-90	X						
	Rubbermaid	X			10-19-90	X						
	Emerson Elec.	X			08-28-90		X					
	R.R. Donnelley	X			10-19-90	X						
	Citi Corp.	X			07-26-90	X						
	Citi Corp	X			11-16-90	X						
	Paramount	X			03-08-90	X						
	U.S. Treasury Note	X			11-21-90		X					
	Citizen & So. Note	X			11-28-90		X					
	Loews	X			06-26-90		X					
	Knight Ridder	X			07-10-90	X						
	ADOBE	X			08-12-90		X					
	Markel Corp.	X			06-15-90	X						
	Markel Corp.	X			10-22-90	X						
	Abbott Labs	X			11-16-90		X					
	Bally Mfg	X			07-26-90	X						
	Benham-Certified Metals	X			Monthly Purchases	X						
	U.S. Treasury Note	X			01-23-90		X					
	Polar Fund	X			07-16-90				X			

Reporting Individual's Name
Norman Sisisky

PART IV—TRANSACTIONS

(Interest therein of Member through his New Dominion Limited Partnership holdings)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

(Common stock unless otherwise indicated) NONE ☐

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Balanced SPD Fund	X			10-01-90		X					
	Polar Fund	X			Various (Reinvestments)	X						
	Lumex	X			06-01-90	X						
	Placer Dome	X			06-19-90	X						
	ESCO Electris (rec from Emerson Electric)			X	11-01-90	X						
	Estate of Celia S. Brown - Advance (partial collection)			X	08-24-90			X				

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Reporting Individual's Name

Norman Sisisky

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [x]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Norman Sisisky

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Joint Venturer	The Berkeley Venture
Limited Partner	New Dominion Limited Partnership
Limited Partner	Sini Associates Ltd.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
	See Note (9) to Parts II and III hereof.	

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Norman Sisisky	May 15, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 6:21
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

(1)

David Evans Skaggs
(Full Name)

1507 Longworth House Office Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Colorado District: Second	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MK (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	National Trust for Historic Preservation	Spouse Salary	NA	
	American Trucking Assn. 7/19/90*	Speech	$1,000	X
	Brookings Institution 2/26/90; 9/24/90; 10/15/90*	Speeches (3)	$1,200	X
	*No fees or honoraria were paid to Congressman Skaggs. In each instance, a charitable contribution was made by the "source" organization directly to charities selected by them.			

For additional earned income, use next page

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Reporting Individual's Name
David Evans Skaggs

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Dean Witter IRA:																										
	Exabyte Corp.		X															X									
	Cell Technology, Inc.	X																X									X
	Synergen, Inc.		X											X				X									X
	Dean Witter Convertible Sec.		X											X				X									X
	Dean Witter Liquid Asset Fund	X											X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: David Evans Skaggs

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Mountain States Bank IRA Savings Acct.		X										X					X									

Reporting Individual's Name: David Evans Skaggs

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Townhouse, 3320 34th Street, Boulder, CO.			X								X								X						
S	First National Bank, Boulder IRA		X										X						X							
S	Grace Petroleum			X													Royalty			X						
S	Bank of Boulder, Savings		X										X					X								

Reporting Individual's Name: David Evans Skaggs

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Synergen, Inc., common stock	x			2-09-90	x						
	Dean Witter Convertible, Sec. Tr.		x		2-12-90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Principal Mutual Life Insurance Co.	Mortgage on 3320 34th Street, Boulder, Co.			X				

Reporting Individual's Name
David Evans Skaggs

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Pharmaceutical Mfg. Assn.	Baseball tickets	$93.50
Metropolitan Opera Assn.	Opera tickets	$200.00
National Restaurant Assn.	Silver salt & pepper set	under $100

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
American-Egyptian Cooperation Foundation	Jan. 5-12 1990	Roundtrip Air Travel - Washington, D.C. to Cairo, Egypt, 7 days, food & lodging, self & spouse	
Fairleigh Dickinson University Rutherford, NJ	Apr. 5-9 1990	Roundtrip Air Travel - Washington, D.C. to London, England, 5 days, food & lodging, self & spouse	
Lighthawk (a non-profit international & environmental organization)	Aug. 24-28, 1990	Roundtrip Air Travel - Denver, Co. to Seattle, WA, 1 day, food & flight over Pacific Northwest forests, car rental, self & spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
David Evans Skaggs

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Trustee	Rocky Mountain Planned Parenthood

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app. 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
David E. Skaggs	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY -8 P 3:35
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Joseph Richard Skeen
(Full Name)

2447 Rayburn HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: NM District: 2nd	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [XX]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

Joseph Richard Skeen

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Fidelity Bankers Life-Deferred (PaineWebber) Annuity		X										X						X								
	Fidelity & Guaranty Life-Deferred (PaineWebber) Annuity		X										X						X								
	Puerto Rico Commwelth Hway-(PaineWebber)Municipal Bond		X										X						X								
JT	Ranch-To Include 15,000 acres, Land,Improvements&Livestock - (58% Holding)Picacho,NM-Lincoln, Cty.							X									Ranch Income	X	(Net)					X	(Gross)	
JT	#7Deborah Dr.-Roswell, NM				X							X							X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Joseph Richard Skeen

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Oil & Gas-Working Interest(5%)		X														Oil&Gas Sales	X	(Net) X	(Gross)							
	Wright Patman Credit Union			X							X								X								
JT	Real Estate-Ruidoso, NM		X								Undeveloped Property (Not income producing)																
	6 Mile Hill Real Estate-Roswell, NM		X								Undeveloped Property (Not income producing)																
JT	Farm Credit Services-Stock	X											X					X									
	Common Stock-United NM Bank	X											X					X									
S	Note RC Jones Trust-Receivable		X										X	X					X				X				
S	Common Stock-Bristol Myers		X								X							X									
S	Common Stock-UNC Res., Inc.	X									X							X									
S	Common Stock-Pan-Amer.Corp.	X									X							X									
S	Common Stock-Seagull Energy Corp	X									X							X									

Reporting Individual's Name

Joseph Richard Skeen

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
JT	Farm Credit Service-Roswell,NM	Picacho,NM-Lincoln,Cty. Mortgage on Ranch				X			
JT	#7 Deborah Dr.-Roswell, NM Roswell Escrow Co.-Real Estate-	Mortgage on Roswell Property		X					

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Reporting Individual's Name

Joseph Richard Skeen

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [xx]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Spouse Only Mary Skeen-NMState University Council for Agriculture Research Extension & Training	Mar.20- Apr.4,1990	Roundtrp Air travel from Roswell,NM to Wash.,DC to attd. joint Mtg w/Nat'l.Assoc. of State Univ. & Land Grant Colleges-Mtg. from Apr.1-4 - Add'l days at own expense. Reimbursed for Airfare, Mtg. Registration, Mileage & Meals.	
Spouse Only-Mary Skeen NM State University	Oct.16,1990 Nov.17,1990 Dec.14,1990	Travel roundtrp from Picacho,NM to Las Cruces,NM - Reimbursed for Overnight Lodging, Meals & Mileage	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Joseph Richard Skeen

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [XX]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [XX]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [XX] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Joseph R. Skeen	May 7, 1991

GPO 1991 27-508 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 5:28

U.S. HOUSE OF REPRESENTATIVES

Ike Skelton
(Full Name)

2134 Rayburn HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: MO District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

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(Office Use Only)
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In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Government Institutes,Inc., Washington, D.C. (1/8/90)	Speech	500.00	
	AT&T, Arlington, VA (1/17/90)	Speech	2000.00	
	Princeton University, Princeton, NJ, (5/8/90)	Speech	400.00	
	The Tobacco Institute, Washington, D.C., (5/15/90)	Speech	2000.00	
	Hotel & Restaurant Employees International Union, Washinton, D.C., (7/24/90)	Speech	2000.00	
	Emerson Electric Management Club, St. Louis, MO (8/22/90)	Speech	1000.00	
	Harvard University, Campbridge,MA, (10/10/90)	Speech	500.00	
	C.A.S.I. (Convenient Automotive Services Institute) Chicago,IL, (9/19/90)	Speech	2000.00	
	Government Institutes, Inc.,Washington, D.C. (12/31/90)	Speech	500.00	

For additional earned income, use next page

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Reporting Individual's Name

Ike Skelton

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Note & Contract for sale to Lafayette County Bankshares Inc., Lafayette County																										
	Bank, Lexington, MO. ($105,840 payable over 10 years.																										
	$24,250 down payment) July 1, 1990					X								X													X
JT	Ferris, Baker Watts, Inc.(money fund)		X										X					X									X
DC	Ferris, Baker Watts, Inc.(money fund)	X											X					X									X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ike Skelton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Fractional Interest in Store building in Delhi, LA		X									X					X									
S	Sun Oil Company, mineral rights		X								X							X								
DC	U.S. Treasury Bonds	X											X				X									X
	Trust, Carolyn B. Skelton Estate, Commerce Bank, Kansas City, MO																									
	Assets:-Farmland 1/3 interest in 323 acres Lafayette County, MO																									
	-Commerce Bank Tax Free Bond Funds																									
	-Commerce Bank Institutional Liquid Assets Tax-Exempt					X					X	X	X								X					
	TOTAL ASSETS :$145,439.00																									
S	Trust, Virginia H. Anding Estate, United Missouri Bank, Kansas City, MO																									
	Assets: -United Missouri Bank Common Stock Fund																									
	-United Missouri Bank Common Tax Exempt Fund																									
	-United Missouri Bank Common Taxable Fixed Income Fund																									
	-United Missouri Bank Short Term Money Market Fund																									
	TOTAL ASSETS :$216,600.28					X					X		X								X					
	Missouri State Retirement System (State Senate 6 years	value not determined														vested interest in pension										

Reporting Individual's Name
Ike Skelton

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Lafayette County Bankshares ($105,840 payable over 10 years. $24,250 down payment)		X									
JT	Treasury bonds		X			less than $1000.00						
JT	Ferris, Baker Watts, Inc. (money fund)	x			monthly	$100.00 a month						
DC	Ferris, Baker Watts, Inc. (money fund)	x			monthly	$25.00 a month						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Lafayette County Bank , Lexington, MO	Open note		X					

Reporting Individual's Name
Ike Skelton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors & P.B.S.	Civil War Video Tapes (educational purpose)	$130.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Newport News Shipbuilding	Mar. 23-24, 1990	Two nights food and lodging, member and spouse, in connection with submarine christening where member was speaking, spouse was sponsor.	
Princeton University	May 8, 1990	Roundtrip Air from Wash., D.C. to Princeton, N.J., ground transporation, food, member, speaking engagement.	
Harvard University (Kennedy School of Government)	Aug. 20-21, 1991	Roundtrip Air (Kansas City, MO - Boston, MA - St. Louis, MO), one night lodging, food, ground transportation, member, speech.	
Military Order of the World Wars (Kansas City Chapter)	Sept. 8, 1991	One night lodging, food, member and spouse, speech.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Ike Skelton

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Ike Skelton, Sr. - Memorial Trial Practice Award (University of Missouri School of Law)
Trustee	Ike Skelton, Sr. - Outstanding Sigma Chi Award (University of Missouri)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ike Skelton	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2 15

HAND DELIVERED

James C. Slattery
(Full Name)

1512 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S House of Representatives	State Kansas District Second	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Public Securities Association (Received 3-8-90)	Honorarium	$2,000.00	
	Federal National Mortgage Association (Received 3-20-90)	Honorarium	$2,000.00	
	American College of Emergency Physicians (Received 5-22-90)	Honorarium	$2,000.00	
	American Council On Education (Received 5-22-90)	Honorarium	$1,000.00	
	National Association of Broadcasters (Received 6-26-90)	Honorarium	$1,000.00	
	National Risk Retention Association (Received 9-27-90)	Honorarium	$2,000.00	
	National Association of Independent Lubes (Received 10-2-90)	Honorarium	$2,000.00	
	Casualty & Property-12 (Received 10-2-90)	Honorarium	$500.00	
	National Telephone Cooperative Association (Received 10-18-90)	Honorarium	$500.00	
	San Francisco Leadership Foundation (Received 11-9-90)	Honorarium	$500.00	

For additional earned income, use next page

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Reporting Individual's Name
James C. Slattery

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
The Fertilizer Institute (Received 11-15-90)	Honorarium	$2,000.00	
United States Telephone Association (Received 12-3-90)	Honorarium	$1,000.00	
R.Duffy Wall & Associates, Inc. (Received 12-5-90)	Honorarium	$1,000.00	
BP America, Inc. (Received 12-5-90)	Honorarium	$2,000.00	
BellSouth D.C.,Inc. (Received 12-14-90)	Honorarium	$2,000.00	

Reporting Individual's Name
James C. Slattery

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X							X								X									X
			George Wash Credit Union Accounts			X								X								X							
			182 Main Street, Dover, Delaware				X						X								X								
JT	Highland Park Bank				X									X					X										
JT	Kansas Credit Union		X											X					X										
JT	Sovran Bank, VA/Personal Savings					X								X							X								
JT	Bank of Horton, Ks. (IRA's)				X									X						X									
JT	Real Estate, Atchison, Ks.-farm land approx. 100 acres					X							X						X										
JT	Real Estate-office bldg. 990 Fairlawn, Topeka, Ks. (½ interest)						X						X											X					X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James C. Slattery

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Real Estate-office bldg. 3300 W.6th,Topeka,Ks.				X							X											X			
JT	Real Estate-619 Taylor,Topeka,Ks. (2/3 interest currently)					X						X										X				X
JT	Real Estate 2620 Central Park,Topeka,Ks.			X								X									X					
JT	Real Estate 2408 Moundview,Topeka,Ks.			X								X									X					
JT	Real Estate 535 Oakley, Topeka,Ks.			X								X									X					
JT	Real Estate 2309 Moundview,Topeka,Ks.			X								X									X					
JT	Real Estate 2405 W.24th,Topeka,Ks.			X								X									X					
JT	Real Estate 805 Saline,Topeka,Ks.			X								X									X					
JT	Real Estate 29th Street Terrace,Topeka,Ks.			X								X										X				X
JT	Contracts, real estate,Topeka,Ks.		X										X					X								

Reporting Individual's Name
James C. Slattery

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Real Estate-office bldg.-990 Fairlawn,Topeka,Ks.-exchanged 1/4 interest in 990 Fairlawn for 1/3 interest in 619 Taylor			X	12-90			X				
JT	Real Estate-29th Street Terrace,Topeka,Ks.		X		12-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	Ronald Robb (Paid off)	Real Estate mortgage			X				
JT	Topeka Savings Assoc. (Currently owned by Bank IV)	Real Estate Mortgages			X				
JT	Capitol Federal Savings	Real Estate Mortgages		X					
JT	Highland Park Bank	Real Estate Loan					X		
JT	Fidelity State Bank	Real Estate Loan	X						

Reporting Individual's Name
James C. Slattery

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Bruce Chrisensen,Pres.,PBS	9 video tape set from PBS Video-"The Civil War"	$180.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
German Marshall Fund of the U.S.	May 26-June 4,'90	U.S.Congressional Study Grp.On Germany Conference-Bonn,Berlin, Budapest-air travel DC Natl-BonnBerlin-Budapest-Bonn; 6 nights lodging & associated meals for self.	
Friedrich Ebert Foundation	May 30,31 1990	U.S.Congressional Study Grp.On Germany Conference/2 nights lodging in Berlin & associated meals for self	
German Marshall Fund of the U.S. SPOUSE	May 30-June 4,1990	U.S.Congressional Study Grp.on Germany Conference-Bonn,Berlin, Budapest-rd.trip air travel/Dulles-Berlin-Budapest-Bonn-Dulles two nights lodging & associated meals for Spouse	
Friedrich Ebert Foundation-SPOUSE	May 30,31 1990	U.S.Congressional Study Grp.On Germany Conference/2 nights lodging in Berlin & associated meals for Spouse	
San Francisco Leadership Foundation (keynote address)	Nov.8-10, 1990	rd.trip airfare-DC Natl-San Francisco-Indianapolis-DC Natl. & 2 nights lodging & 1 breakfast	

(PART VII CONTINUED ON SEPARTE SHEET)

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name:
James C. Slattery

PART VII-"REIMBURSEMENTS" And Gifts Of Transportation, Lodging, Food, Entertainment--CONTINUED FROM Page A-4:

SOURCE:	DATE(S):	BRIEF DESCRIPTION (itinerary & Nature of Expenses):
BP America, Inc. (address)	Dec.5-8,1990	rd.trip airtravel-DC Natl-Philadelphia-Indianapolis-KCI-Indianapolis-DC Natl.; one night lodging & one meal (dinner)
Southwestern Bell Corp. (address)	Dec.13-14,1990	rd.trip air travel-DC Natl.-St.Louis-Topeka-KCI-DC Natl.; one meal (lunch)
International Foundation, Washington, D.C.-SPOUSE (fact-finding trip)	Feb.10-18,1990	rd.trip airfare Wash.DC to Entebbe, Uganda, 3 days food & lodging for spouse. (trip approved by Comm.on Standards of Official Conduct by letter of 2-8-90)

Reporting Individual's Name
James C. Slattery

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Westside Properties (disbanded 1st ½ of 1990)

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, § 104 and 18 U.S.C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May, 14, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

DANIEL FRENCH SLAUGHTER, JR.
(Full Name)

1404 LONGWORTH HOUSE OFFICE BUILDING, WASHINGTON, D. C. 20515
(Mailing Address)

HAND DELIVERED

Filer Status	[X] Member of the U S House of Representatives	State: Virginia District: 07	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	VETERANS ADMINISTRATION	Disability Compensation	$6696.00	

For additional earned income, use next page

Reporting Individual's Name

D. FRENCH SLAUGHTER, JR.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Second National Bank Stock (4800 Sh.) Culpeper, Virginia				X						X										X						
	Second National Bank, Money Market					X							X										X				
	Jefferson Savings & Loan Assn, CD Culpeper, Virginia			X									X							X							
	Jefferson Savings & Loan Assn, Stock (750 shares)		X								X							X									
	Mobil Oil Corporation (stock)	X									X								X								
	U. S. Steel	X											X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: D. FRENCH SLAUGHTER, JR.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Provident Mutual Life Insurance	X											X						X								
	Stotler & Co. (holding company for Tullis Trading, Inc.			X									X							X							
	Davenport & Company, Inc.				X								X								X						
	Prudential-Bache Account (Securities)			X									X					X									
	40% int/Button Office Building Culpeper, Virginia				X							X										X					
	House/Lot, Culpeper Street Culpeper, Virginia			X								X									X						
	Real/Personal property, Pima County, Arizona				X							X									X						
	d/t, Culpeper Street property Culpeper, Virginia	X											X					X									

Reporting Individual's Name
D. FRENCH SLAUGHTER, JR.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Second National Bank, Culpeper, Virginia	personal loan			X				
	Second National Bank, Culpeper, Virginia	deed of trust on Culpeper Street property		X					
	Life Insurance Policies	loans on policies		X					
	Sovran Bank	automobile loan		X					

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Reporting Individual's Name
D. FRENCH SLAUGHTER, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
D. FRENCH SLAUGHTER, JR.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [X] No [ ] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
D. French Slaughter Jr.	May 13, 1991

GPO 1991 37-598 (m)

HAND DELIVERED

D. FRENCH SLAUGHTER, JR.
1071 OAKLAWN DRIVE
CULPEPER, VIRGINIA 22701

1991 MAY 29 PM 1:45
OFFICE OF REPRESENTATIVES
U.S. HOUSE OF REPRESENTATIVES

May 28, 1991

The Clerk
U. S. House of Representatives
Office of Records and Registration
1036 Longworth HOB
Washington, D. C. 20515-6612

MC (7)

Dear Sir:

Thank you for your letter of May 20, 1991, and the enclosure which mention the need for additional information.

Part II. ASSETS

The address of the real property in Pima County, Arizona, is 9410 N. Sidewinder Lane, Tucson, Arizona 85743. The personal property consists of two mobile homes located on said real property.

Part IV. TRANSACTIONS

In 1989 and previous years, the Jefferson Savings and Loan Association stock had been listed under "Holdings" as accounts. Included under accounts were the certificate of deposit and the stock. The certificate of deposit earned interest but no dividends have been earned from the stock.

Philips Lamp is included under Davenport & Company which is a brokerage company. During 1990, there were Tax-Free Instruments Trust (on which interest was earned as shown under Davenport), and Philips Lamp (on which there were no earnings). In 1989 and previous years, I showed these two items separate for Davenport.

I apologize for any inconvenience this may have caused your office.

Sincerely,

D. French Slaughter, Jr.
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 1:01
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

DANIEL FRENCH SLAUGHTER, JR.
(Full Name)

1404 LONGWORTH HOUSE OFFICE BUILDING, WASHINGTON, D. C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State: Virginia District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED
MC
(Office Use Only)

1991 MAY 29 PM 1:45
U.S. HOUSE OF REPRESENTATIVES

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	VETERANS ADMINISTRATION	Disability Compensation	$6696.00	

For additional earned income, use next page

4176

Reporting Individual's Name

D. FRENCH SLAUGHTER, JR.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000			DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S — ABC Corporation Stock		X									X								X								X
	George Wash. Credit Union Accounts			X										X								X						
	182 Main Street, Dover, Delaware				X								X								X							
✓	Second National Bank Stock (4800 Sh.) Culpeper, Virginia				X							X										X						
✓	Second National Bank, Money Market					X								X										X				
✓	Jefferson Savings & Loan Assn, CD Culpeper, Virginia			X										X							X							
	Jefferson Savings & Loan Assn, Stock (750 shares)		X									X							X									
✓	Mobil Oil Corporation (stock)	X										X								X								
✓	U. S. Steel	X												X						X								

For additional assets and unearned income, use next page

4177

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: D. FRENCH SLAUGHTER, JR.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Provident Mutual Life Insurance	X											X						X								
✓	Stotler & Co. (holding company for Tullis Trading, Inc.			X									X							X							
✓	Davenport & Company, Inc.				X								X								X						
✓	Prudential-Bache Account (Securities)			X									X					X									
✓	40% int/Button Office Building Culpeper, Virginia				X							X										X					
✓	House/Lot, Culpeper Street Culpeper, Virginia			X								X									X						
✓	Real/Personal property, Pima County, Arizona				X							X									X						
✓	d/t, Culpeper Street property Culpeper, Virginia	X											X					X									

Reporting Individual's Name

D. FRENCH SLAUGHTER, JR.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Second National Bank, Culpeper, Virginia	personal loan			X				
	Second National Bank, Culpeper, Virginia	deed of trust on Culpeper Street property		X					
	Life Insurance Policies	loans on policies		X					
	Sovran Bank	automobile loan		X					

Reporting Individual's Name

D. FRENCH SLAUGHTER, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

D. FRENCH SLAUGHTER, JR.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [X] No [ ] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
D. French Slaughter Jr.	May 13, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:23

U.S. House of Representatives
HAND DELIVERED

Louise M. Slaughter
(Full Name)

14 Manor Hill Drive
(Mailing Address)

Fairport, New York 14450

Filer Status	[X] Member of the U.S House of Representatives	State: New York District 30th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

mc (Office Use Only) (6)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D.C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Eastman Kodak Company	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
Louise M. Slaughter

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See Instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
JT	Marine Midland Savings, Roch, NY		X										X					X								
JT	Columbia Banking Mtge Escrow Interest	X											X				X									
JT	Primerica Corp		X								X						X									
JT	Oppenheimer Special Fund		X								X						X									
JT	Fidelity USA Money Market Fund			X							X									X						
	Procter & Gamble			X							X							X								

For additional assets and unearned income, use next page

4183

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Louise M. Slaughter

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Clorox		X								X							X									
S	Eastman Kodak Co (TRASOP)		X								X							X									
	Fidelity Growth & Income (IRA)		X								X			X													X
S	" "		X								X			X													X
	Fidelity Retirement Growth (IRA)		X											X													Value Not
S	" "		X											X													Ascertainable
	Vanguard-Trustees Comingled Fund (IRA)			X										X													
S	Mutual Qualified Fund (IRA)			X										X													
	New York State Retirement System - Non Contributory - Value Not Ascertainable																										
S	Eastman Kodak Pension Fund - Non Contributory - Value Not Ascertainable																										
S	Eastman Kodak Savings and Investment Plan (401 K)					X							X														Value Not
	Thrift Savings Plan for Federal Employees			X									X	X													Ascertainable

Reporting Individual's Name
Louise M. Slaughter

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Fidelity Growth & Income Portfolio (IRA 1989)	X			4-6-90	X						
S	" " "	X			4-6-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name
Louise M. Slaughter

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☑

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Impac 2000		2/19-20, 1990	Roundtrip Air Travel from Wash, DC to Maimi, Fl, lodging & food	
Advisory Common Status of Women		3/23, 1990	Roundtrip Air Travel from Wash, DC to Sarasota, Fl	
Womens Campaign Research Fund		3/24-25, 1990	Roundtrip Air Travel from Sarasota, FL to Maimi, Fl, lodging & food	
Fairleigh Dickenson University		4/6-9, 1990	Roundtrip Air Travel from Wash, DC to Wroxton, England, lodging & food, self and spouse	
Democratic Leadership Council		5/4, 1990	Roundtrip Air Travel fromWash, DC to Minneapolis, MN	
BPW/USA		7/24, 1990	Roundtrip Air Travel from Wash, DC to Charlotte, NC	
American Federation of Teachers		7/2-3, 1990	Roundtrip Air Travel from Rochester, NY to Boston, MA, lodging & food	
Impac 2000		11/10, 1990	Roundtrip Air Travel from Rochester, NY to Chicago, IL, transportation	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Louise M. Slaughter

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
National Spokesperson	PMI/Strang Clinic Breast Cancer Registry

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☑

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Louise M. Slaughter	May 15, 1991

91 MAY 15 PM 4:26

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Christopher H. Smith, MC
(Full Name)

74 Tynemouth Court
(Mailing Address)

Robbinsville, New Jersey 08691-9354

Filer Status	[X] Member of the U.S. House of Representatives — State: New Jersey, District: Fourth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
Christopher H. Smith, MC

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Prudential Bache New Jersey ~~Municipal Fund~~	X									X							X								X
JT	Twentieth Century Cash Reserve		X								X								X							X
JT	Pureto Rico Electric Power ~~Authority Muni Bond (Paine~~ Webber, Princeton, NJ)		X										X						X							
JT	Landmark Savings and Loan CD		X										X						X							X

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Christopher H. Smith, MC

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
DC	Certificate Accrual Treasury Securities		X										X					X								
DC	" " " " " "		X										X					X								
DC	" " " " " "		X										X					X								
DC	" " " " " "		X										X					X								
JT	Congressional Federal Credit Union		X										X					X								

Reporting Individual's Name: Christopher H. Smith, MC

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Prudential Bache New Jersey Muni Fund		x		Redemption 7/26/90	x						
JT	Twentieth Century Cash Reserve	x	x		Purchase: 2/20/90							
					Redemption:	x						
					4/12/90 6/4/90							
					7/23/90 Liquidation: 12/28/90 monthly dividend reinvested (cont.)							

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name: Christopher H. Smith, MC

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Landmark Savings and Loan CD		X		Redemption: 3/6/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Christopher H. Smith, MC

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [x]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Christopher H. Smith, MC

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Member, Board of Directors,	Americans United For Life Legal Defense Fund

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Christopher H. Smith	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 6 08
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Lamar Seeligson Smith
(Full Name)

422 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Texas District: 21st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Christian Science Practitioner	Spouse Earnings	NA	

For additional earned income, use next page

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Reporting Individual's Name

Lamar Seeligson Smith

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
	Life Tenant, undivided																											
	(25%) Surface & Mineral																											
	Interest of Lamar Seeligson Ranch,									X			X					Royalties								X		
	Premont, TX																											
	Partnership Interest, Lamar Seeligson-				X								X					sale receipts					X					
	Ranch																											

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Lamar Seeligson Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Proctor & Gamble			X								X								X								
Southwest Airlines			X								X								X								
National Financial Services Money Market Account *										X*			X								X						
General Electric *										X*	X								X								
National Bancshares Corp. *										X*	X								X								
CBS, INC. *										X*	X									X							
IBM *										X*	X										X						
Pepsico *										X*	X											X					
AT & T										X*	X								X								
Pacific Telesis *										X*	X								X								
Bell Atlantic *										X*	X								X								
General Investment Corporation			X										X						X								
First American Bank, Washington, D.C.		X											X						X								
Wright Putman Federal Credit Union				X									X							X							

X* = NO INTEREST IN STOCK HOLDING/LIFE INTEREST IN DIVIDENDS ONLY

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Lamar Seeligson Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	National Bank of Commerce-San Antonio, Texas	X									X							X									
DC	Largo Vista--Joint Venture (undeveloped land in Bandera County)			X													Sale of ~~property~~					X					
DC	Oak Forest--Joint Venture(Undeveloped land in Bandera County)			X													Sale of ~~property~~					X					
DC	Louisiana Land Trust		X								X							X									
DC	National Bancshares Corp. of Texas		X								X							X									
DC	Smith Barney Money Market Account		X								X								X								

Reporting Individual's Name

Lamar Seeligson Smith

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Notes held by Jessica C. Kimmel of San Antonio, Texas and by Adrien Heissler of Lakehills, TX	indebtedness on Oak Forest Property in Bandera County-joint venture			X				

Reporting Individual's Name

Lamar Seeligson Smith

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors	Civil War video tapes	$120.00
KLRN, San Antonio PBS Station	Civil War video tapes	$120.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☒

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

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Reporting Individual's Name

Lamar Seeligson Smith

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Lamar Seeligson Ranch
Member	Association of Yale Alumni Board of Governors

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Lamar Smith	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 16 PM 3:55
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

HC

(Office Use Only) 8

Lamar Seeligson Smith
(Full Name)

422 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Texas District: 21 st	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Christian Science Practitioner	Spouse Earnings	NA	

For additional earned income, use next page

4202

Reporting Individual's Name

Lamar Seeligson Smith

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash. Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	Life Tenant, undivided (25%) Surface & Mineral Interest of Lamar Seeligson Ranch, Premont, TX							X				X				Royalties							X			
	Partnership Interest, Lamar Seeligson-Ranch			X								X				sale receipts					X					

For additional assets and unearned income, use next page

Form of Disclosure - A

4203

Reporting Individual's Name

Lamar Seeligson Smith

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Proctor & Gamble		X								X								X							
	Southwest Airlines		X								X								X							
	National Financial Services Money Market Account *									X*			X								X					
	General Electric *									X*	X								X							
	National Bancshares Corp. *									X*	X								X							
	CBS, INC. *									X*	X									X						
	IBM *									X*	X										X					
	Pepsico *									X*	X											X				
	AT & T									X*	X								X							
	Pacific Telesis *									X*	X								X							
	Bell Atlantic *									X*	X								X							
	General Investment Corporation			X									X						X							
	First American Bank, Washington, D.C.	X											X						X							
	Wright Putman Federal Credit Union				X								X							X						

X* = NO INTEREST IN STOCK HOLDING/LIFE INTEREST IN DIVIDENDS ONLY

Financial Disclosure A-24

Reporting Individual's Name

Lamar Seeligson Smith

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	National Bank of Commerce-San Antonio, Texas	X									X							X									
DC	Largo Vista--Joint Venture (undeveloped land in Bandera County)			X													Sale of ~~property~~					X					
DC	Oak Forest--Joint Venture(Undeveloped land in Bandera County)			X													Sale of ~~property~~					X					
DC	Louisiana Land Trust		X								X							X									
DC	National Bancshares Corp. of Texas		X								X							X									
DC	Smith Barney Money Market Account		X								X								X								

Reporting Individual's Name

Lamar Seeligson Smith

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Notes held by Jessica C. Kimmel of San Antonio, Texas and by Adrien Heissler of Lakehills, TX	indebtedness on Oak Forest Property in Bandera County-joint venture			X				

Reporting Individual's Name
Lamar Seeligson Smith

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors	Civil War video tapes	$120.00
KLRN, San Antonio PBS Station	Civil War video tapes	$120.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☒

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name: Lamar Seeligson Smith

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Partner	Lamar Seeligson Ranch
Member	Association of Yale Alumni Board of Governors

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [ ] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [ ] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Lamar Smith	May 16, 1991

GPO 1991 37-588 (m)

4208

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 3:27
U.S. HOUSE OF REPRESENTATIVES

Lawrence J. Smith
(Full Name)

3511 N. 52nd Avenue
(Mailing Address)

Hollywood, Florida 33021

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: 16	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED
MC
(Office Use Only)
5

4209

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Gold Coast Savings Bank	Director's fee	3,100	
	Electronic Industries Asso., Wash. DC (3/5/90)	Honoraria	1,000	
	Television + Radio PAC, Wash. DC (3/2/90)	"	2,000	
	National Association Broadcasters, Wash DC (4-23-90)	"	2,000	
	National Association Realtors, Wash. DC (4-26-90)	"	1,000	
	National Cable TV Asso., Wash. DC (4/19/90)	"	1,500	
	Tobacco Institute, Wash. DC (7/11/90	"	2,000	
	Cornell Rice + Sugar Co, Westfield, NJ (7/26/90)	"	2,000	
	American Council of Life Ins, Wash. DC (9/12/90)	"	1,000	
	Development Corp for Israel, NY, NY (10/26/90)	"	2,000	

For additional earned income, use next page

Reporting Individual's Name
Lawrence J. Smith

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Talwood Associates-Partnership		X										X	X								X					
	Lauderdale Airport Asso-S. Corp.		X										X						X								
	California Federal Savings + Loan		X										X						X								
	Wright Patman Congressional FCU			X									X							X							

For additional assets and unearned income, use next page

4210

Reporting Individual's Name
Lawrence J. Smith

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Gold Coast Savings Bank Common Stock-Worthless				12-31-90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Gold Coast Savings Bank	Unsecured Loan	X						

4211

Reporting Individual's Name
Lawrence J. Smith

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Various + Sundry Donors - all items valued under $75	Unsolicited books, audio tapes, video tapes, cakes, flowers, recordings, cookies, candy, nuts, glasses, mugs, paperweights, tickets, Xmas ornaments, periodicals, sundries, hats, buttons, T-shirts, aprons, maple syrup coolers, digital clocks, pictures, photographs	$700-800

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Electronic Industries Asso.	Jan. 8, 1990	R/T airfare from Wash DC to Las Vegas. 2 days food + lodging, entertainment, self + spouse	
Television + Radio PAC	Feb 8-9, 1990	R/T airfare from Wash DC to Nassau - 1 day food + lodging - self	
National Asso. of Broadcasters	Apr 1, 1990	R/T airfare Ft. Lauderdale to Atlanta No food or lodging - self	
National Cable TV Asso.	May 20, 1990	R/T airfare Ft. Lauderdale to Atlanta No food or lodging - self	
Connell Rice + Sugar Co.	July 27, 1990	R/T airfare - Wash DC to Newark - No food or lodging - self	
Development Corp. for Israel	Dec 14, 1990	R/T airfare - Wash DC to Cleveland - 1 day food + lodging - self	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4212

Reporting Individual's Name
Lawrence J. Smith

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Partner	Talwood Associates

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5/14/91

GPO 1991 37-598 (m)

4213

LAWRENCE J. SMITH
16TH DISTRICT, FLORIDA

COMMITTEE ON APPROPRIATIONS
FOREIGN OPERATIONS, EXPORT FINANCING AND RELATED PROGRAMS
LEGISLATIVE
SELECT COMMITTEE ON NARCOTICS ABUSE AND CONTROL

DEPUTY MAJORITY WHIP
VICE-CHAIR, DEMOCRATIC STUDY GROUP

Congress of the United States
House of Representatives
Washington, DC 20515

113 CANNON BUILDING
WASHINGTON, DC 20515-0916
(202) 225-7931

DISTRICT OFFICE:
PRESIDENTIAL CIRCLE
4000 HOLLYWOOD BLVD.
SUITE 380 N
HOLLYWOOD, FL 33021-6870
(305) 987-6484 BROWARD
(305) 625-6111 DADE

HAND DELIVERED

1991 MAY 15 PM 3:01
U.S. HOUSE OF REPRESENTATIVES

May 15, 1991

mc ①

The Honorable Louis Stokes
Chairman
Committee on Standards of Official Conduct
HT-2 the Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

After submitting my Financial Disclosure Statement yesterday, May 14th, an inadvertent omission of information was discovered. I am therefore asking that the following information be inserted in Parts II and III - Assets and "Unearned" Income:

Block A	Block B	Block C
Gold Coast Savings Bank IRA CD	check item B	check interest & block I

This is not an amendment to the statement, but only information that needs to be included.

Thank you for your attention to this matter.

Very Truly Yours,

LAWRENCE J. SMITH
Member of Congress

LJS:mmb

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

'91 MAY 14 PM 12:57

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 6

Neal Smith
(Full Name)

7504 N.E. 12th Avenue
(Mailing Address)

Altoona, Iowa 50009

Filer Status	[X] Member of the U S House of Representatives	State Iowa District 4th	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
Gross income from farming (husband & wife)				
Although not subject to limitation, net return				
would be less than limitation. This figure also				
includes the income representing return on				
farming land and other investments.			62,587.	

For additional earned income, use next page

4215

Reporting Individual's Name

Neal Smith

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)								Category of Amount of Income (X)								Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type) Bank Acct.	Distribution	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X							X
	George Wash. Credit Union Accounts				X									X									X					
	182 Main Street, Dover, Delaware					X							X									X						
JT	Valley Bank				X													X			X							
S	N.Y. Life Ins.				X									X							X							
JT	1st Fla. Bank			X														X			X							
JT	Green Belt Ltd. Pt.						X							X									X					
	"																		X						X			

For additional assets and unearned income, use next page

4216

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Neal Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Share of Farm Belt Inc.							X																		
	(Family Farming Corp.)																									
S	Share of Romack Farms						X																			
	(Iowa Family Farm Corp.)																									
JT	Farm operation including land,							X																		
	equipment, and related property in Iowa including per-																									
	manent home and improvements.																									
JT	L. Robinson (house contract)			X									X	X							X					

Reporting Individual's Name
Neal Smith

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT.	Equitable Ins. Co.	Mortgage on Farm Real Estate		X					
JT	Valley Bk.	Business Line of Credit			X				

4218

Reporting Individual's Name
Neal Smith

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [X]

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Neal Smith

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Consultant Representative	Farm Belt (Family Farm Corp.)

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) **Yes** [ ] **No** [X] **NA** [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) **Yes** [ ] **No** [X] **NA** [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Neal Smith	May 14, 1991

GPO 1991 37-598 (m)

4220

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 15 AM 9 37
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 7

Robert F. Smith
(Full Name)

118 Cannon House Office Building
Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: OR District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute, La Quinta, CA, (1-20-90)	Speech	$2,000	
	National Cattlemen's Assoc., Nashville, (1-29-90)	Speech	$1,000	
	BP America, Albany, GA, (2-2-90)	Speech	$400	
	Chicago Board of Trade, Chicago, (3-16-90)	Speech	$750	
	Chicago Mercantile Exchange, Chicago, (3-16-90)	Speech	$750	
	Harvest States Coop., Washington, D.C., (4-4-90)	Speech	$1,000	
	ConAgra, Inc., Omaha, NE, (6-22-90)	Speech	$2,000	
	U.S. Tobacco Co., Washington, D.C., (7-11-90)	Speech	$2,000	
	Klamath Alliance for Resources, Mt. Shasta City, CA, (7-15-90)	Speech	$1,000	

For additional earned income, use next page

4221

Reporting Individual's Name
Robert F. Smith

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Philip Morris, Washington, D.C., (7-24-90)	Speech	$1,000	
RJR Nabisco, Washington, D.C., (7-27-90)	Speech	$2,000	
Oregon Restaurant Assoc., Washington, D.C., (10-25-90)	Speech	$500	
Western Sugar Co., Chico Hot Springs, MT, (11-16-90)	Speech	$450	
Chevron USA, San Francisco, (11-28-90)	Speech	$1,000	
BP America, Washington, D.C., (12-11-90)	Speech	$2,000	
Hopkins & Sutter, Washington, D.C., (12-17-90)	Speech	$1,000	

Reporting Individual's Name
Robert F. Smith

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash. Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
Ranch property near Burns, OR									X			X											X				
Ranch house near Burns, OR						X						X										X					
Wyburn Bldg., Broadway St., Burns				X								X								X							
Tiller Bldg., Broadway St., Burns			X								X							X									
KeyCorp, common stock (IRA)			X								X								X								
Lincoln Trust, money market (IRA)			X								X								X								

For additional assets and unearned income, use next page

4223

Reporting Individual's Name: Robert F. Smith

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Farm Credit Bank, Spokane, WA	Mortgage on ranch property near Burns, OR				X			
	Wright Patman Federal Credit Union	Personal loan	X						
	Key Bank, Portland, OR	Mortgage on Tiller & Wyburn Bldgs. in Burns, OR		X					

Reporting Individual's Name
Robert F. Smith

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
See attached memo				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

4225

Robert F. Smith -- attachment

PART VII - "Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

The Tobacco Institute
Jan. 18 - 21, 1990
Airfare from San Francisco to Palm Springs to Washington, D.C.
3 days food & lodging, self and spouse

National Cattlemen's Assoc.
Jan. 28 - 30, 1990
Airfare from Boise to Nashville to Washington, D.C.
2 days food & lodging, self

BP American
February 1 - 3, 1990
Roundtrip Air Travel from Washington, D.C. to Albany, GA
2 days food & lodging, self

The Congressional Institute
February 22 - 24, 1990
2 days food & lodging (transportation at own expense), self and spouse

Chicago Board of Trade
March 16, 1990
Roundtrip Air Travel from Washington, D.C. to Chicago
lunch, self

Sunkist Growers Inc.
McDermott, Will & Emery
May 3 - 7, 1990
Roundtrip Air Travel from Washington, D.C. to Los Angeles
1 day food & lodging (remainder at own expense), self

The Jefferson Educational Foundation
June 28 - July 8, 1990
Roundtrip Air Travel from Washington, D.C. to Johannesburg, South Africa
6 days food & lodging, self

Klamath Alliance for Resources and Environment
July 13 - 16, 1990
Roundtrip Air Travel from Washington, D.C. to Redding, CA
3 days food & lodging, self and spouse

Danny Thompson Memorial Golf Tournament
August 22 - 26, 1990
Air Travel from Redmond, OR to Sun Valley, ID to Medford, OR
4 days food & lodging, self and spouse

Chevron USA
November 28 -29, 1990
Roundtrip Air Travel from Medford, OR to San Francisco
2 days food & lodging, self and spouse

Reporting Individual's Name
Robert F. Smith

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Trustee	Willamette University (Salem, OR) Board of Directors

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert F. Smith	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10: 11
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Olympia J. Snowe
(Full Name)

2464 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Maine District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of Maine	Spouse Income		

For additional earned income, use next page

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Reporting Individual's Name
Olympia J. Snowe

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
NONE			

Reporting Individual's Name

Olympia J. Snowe

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	Key Bank				X										X							X							
	Key Bank				X										X							X							
	Key Bank				X										X						X								
	Key Bank				X										X						X								
	Wright Patman Credit Union				X										X						X								
	Fleet Bank				X										X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Olympia J. Snowe

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Fleet Bank	X											X					X									
	Tucker Anthony & R.L. Day				X								X				Cash Mgt. Fd. & Investment Trust Fund				X						
	Key Bank		X										X						X								
	Key Bank		X										X						X								
	Hallwood Realty		X								X							X									X
	Municipal Investment Trust Fund			X									X							X							X
	Fenway Residential Properties			X										X					X								
	Interstate General Stock		X								X								X								
	Freedom Equity Value Fund		X								X			X				X									X
	Tucker Anthony & R.L. Day		X										X						X								
	Griffin Woods Associates		X								X							X									
	Hancock, ME, Rental Property					X						X							X								
	Equitec Real Estate Fund			X									X					X									X
	Griffin Woods Associates (Same as Above)	X												X						X							
	Griffin Woods Associates	X											X					X									

Reporting Individual's Name
Olympia J. Snowe

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Equitec Real Estate Investors Fund converted to Hallwood stock			X	11-1-90	X						
	Freedom Equity Value Fund		X		1-19-90	X						
	Municipal Trust Fund		X		10-15-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Bangor Savings Bank, Bangor, ME	~~Mortgage, Hancock, ME~~	X						
	Griffins Woods Associates promissory note	Freeport, Maine		X					
	Key Bank, Augusta, ME	Mortgage, 216 B Justice Ct. Washington, D.C.		X					

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Reporting Individual's Name
Olympia J. Snowe

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [ ]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
Swampscott, MA M/M Arthur Pappathanasi/	Jewelry Box (wedding gift)	$125
M/M Michael Latti/Concord, MA	Pewter Coffee & Tea Service (Wedding Gift)	$184.25
M/M David Anderson/Boston, MA	" " "	$184.25
MaryAnn Hartman Award Ctte, Orono, ME	Gold Pin Award	$180.00
Van Buren, ME High School Class of 1990	Carving of a Bird	$125.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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Reporting Individual's Name
Olympia J. Snowe

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Kents Hill School, Kents Hill, Maine
Corporator	Mechanics Savings Bank, Auburn, Maine

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to. future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Olympia J. Snowe	May 14, 1991

GPO 1991 37-598 (17)

4234

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10:52
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 9

STEPHEN JOSHUA SOLARZ
(Full Name)

(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: New York District: 13	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date.

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Fund for Peace	Spouse Salary	NA	
	United Jewish Appeal, Rockland Co., NY (Rec'd 1/22/90)	Honorarium	$2,000	
	Columbia University (Rec'd 1/2/90)	Honorarium	100	
	United Jewish Appeal, Lawrence, NY (Rec'd 1/16/90)	Honorarium	2,000	
	United Jewish Appeal, Metro West, NJ (Rec'd 4/9/90)	Honorarium	2,000	
	Washington Post (Rec'd 3/6/90)	Op Ed Fee	200	

For additional earned income, use next page

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Reporting Individual's Name
Stephen Joshua Solarz

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Christian Science Monitor (Rec'd 3/6/90)	Op Ed Fee	$ 100	
United Jewish Appeal, Albany, New York (Rec'd 4/9/90)	Honorarium	$2,000	
Harmonie Club (Rec'd 10/17/90)	Honorarium	1,842	
Foreign Affairs Magazine (Rec'd 4/17/90)	Article Fee	750	
International Media Partners (Rec'd 4/24/90)	Honorarium	2,000	
Institute for Foreign Policy Analysis (Rec'd 5/2/90)	Honorarium	1,000	
AT&T Bell Labs (Rec'd 10/17/90)	Honorarium	500	
Development Corporation for Israel, D.C. (Rec'd 7/9/90)	Honorarium	750	
Development Corporation for Israel, Cleveland, Ohio (Rec'd 7/9/90)	Honorarium	2,000	
Temple Beth El of Springfield, Mass. (Rec'd 10/4/90)	Honorarium	4,450.54	X($2,450.54)
St. Francis College (Rec'd 5/24/90)	Honorarium	150	
CNN "Capitol Gang" (Rec'd 5/24/90)	TV Appearance	200	
Christian Science Monitor (Rec'd 5/24/90)	Op Ed Fee	150	
American League for Exports and Security Assistance (Rec'd 10/17/90)	Honorarium	1,000	
Oriental Daily News (Rec'd 7/9/90)	Honorarium	2,000	
National Review "Firing Line" (Rec'd 10/12/90)	TV Appearance	250	
New York Times (Rec'd 8/15/90)	Op Ed Fee	150	
San Diego Union (Rec'd 8/15/90)	Op Ed Fee	200	
The National Interest (Rec'd 10/4/90)	Article Fee	500	

Reporting Individual's Name
Stephen Joshua Solarz

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
New York Times (Rec'd 11/1/90)	Op Ed Fee	$ 150	
Development Corporation for Israel, Houston, Texas (Rec'd 11/8/90)	Honorarium	2,000	
Development Corporation for Israel, D.C. (Rec'd 11/8/90)	Honorarium	1,000	
Heritage Foundation (Rec'd 10/12/90)	Honorarium	500	
St. Francis College (Rec'd 11/15/90)	Honorarium	100	
U.S. Cane Sugar Refiners Association (Rec'd 10/17/90)	Honorarium	2,000	
St. John's University (Taiwan Forum) (Rec'd 12/18/90)	Honorarium	2,000	
St. John's University (Japan Forum) (Rec'd 12/18/90)	Honorarium	2,000	
St. Francis College (Rec'd 12/18/90)	Honorarium	150	
Christian Science Monitor (Rec'd 12/18/90)	Op Ed Fee	100	
CNN "Capitol Gang" (Rec'd 12/30/90)	TV Appearance	200	
TOTAL TO CHARITY:			$9,642.54

Reporting Individual's Name
Stephen Joshua Solarz

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Fire Island Rental, Seaview NY						X					X											X				
S	Blind Trust I															X						X					
S	Blind Trust II															X						X					

For additional assets and unearned income, use next page

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Reporting Individual's Name
Stephen Joshua Solarz

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
Stephen Joshua Solarz

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
SEE ATTACHED LIST				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Source	Dates	Brief Description
United Jewish Appeal (Rockland Co., NY)	9/10/89	Roundtrip airfare from Wash., D.C. to New York City.
United Jewish Appeal (Lawrence, NY)	11/11/89	Roundtrip airfare from Wash., D.C. to New York City; Taxi transportation.
United Jewish Appeal (Metro West, NJ)	2/4/90	Roundtrip airfare from Wash., D.C. to New York City.
Anti-Defamation League	2/7/90	Roundtrip airfare from Wash., D.C. to New York City.
Indian Medical Assoc. of Southern Calif.	2/16-19	Airfare from Houston to Los Angeles to Washington; 1 night lodging; meals
United Jewish Appeal	3/11	Roundtrip airfare from Wash., D.C. to Albany, New York; 1 night lodging; meals
Harmonie Club	3/13	Roundtrip airfare from Wash., D.C. to New York City
Harvard and Columbia Universities; Arden House Conference	4/6-8	Roundtrip airfare from Wash., D.C. to New York City; Bus transportation to Harriman, New York; 2 nights lodging; meals.
Aspen Institute Southern Africa Policy Forum	4/11-15	Roundtrip airfare from Wash., D.C. to Bermuda for Member and spouse; Limousine service to airport; 4 nights lodging; meals.
ABC News	4/26	Roundtrip airfare from Wash., D.C. to New York City; 1 night lodging; car service to airport.
AT&T Bell Labs	5/4	Roundtrip airfare from Wash., D.C. to Newark; Limousine service to and from airports.
Development Corporation for Israel	5/17	Roundtrip airfare from Wash., D.C. to Cleveland, Ohio; 1 night lodging; meals
Temple Beth El of Springfield, Mass.	5/21	Roundtrip airfare from Wash., D.C. to Hartford, Conn.; 1 night lodging; meals
Oriental Daily News	7/2-7	Roundtrip airfare from Wash., D.C. to Hong Kong for Member and spouse; 6 nights lodging; limousine service; meals

National Urban League	7/31	Roundtrip airfare from Wash., D.C. to New York City; 1 night lodging; meals; Limousine service to airport.
National Review "Firing Line"	8/1	Roundtrip airfare from Wash., D.C. to New York City (received 2/22/91)
Development Corporation for Israel	10/13	Airfare from Wash., D.C. to Houston to Atlanta; 1 night lodging; taxis

Reporting Individual's Name
Stephen Joshua Solarz

PART VIII—POSITIONS

Report the identity of all positions compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Trustee	Brandeis University
Director	MAZON
Director	International Rescue Committee
Director	National Democratic Institute
Director	American Jewish World Service
Director	American Jewish Congress
Director	Sight Savers International

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [X] No [ ] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 15, 1991

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 AM 9 56
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

8

MC

(Office Use Only)

Gerald B. Solomon
(Full Name)
2265 Rayburn House Office Building
(Mailing Address)
Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State ____ District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date ____

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Olien-Davies and Associates Realty	Spouse Real Estate Commissions	NA	
	New York State Government	Retirement Income	3,451 56	

For additional earned income, use next page

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Reporting Individual's Name
Gerald B. Solomon

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Washington Breakfast Group Washington DC 1/15/90	Honoraria	$1,000.00	
The Tobacco Institute LaQuinta, CA 1/17/90-1/19/90	Honoraria	$2,000.00	
Northrup Corporation Los Angeles, CA 1/16/90	Honoraria	$2,000.00	
America Maritime Officers Assoc Dania, FL 3/10/90-3/12/90	Honoraria	$2,000.00	
Phillip Morris Management Corp Washington, DC 3/4/90	Honoraria	$1,000.00	
New York State Credit Union Assoc Albany, NY 5/7/90	Honoraria	$500.00	
Michigan Credit Union League Detroit, MI 5/29/90	Honoraria	$2,000.00	
L.T.V Aerospace and Defense Co Dallas, TX 6/22/90	Honoraria	$2,000.00	
Textron Bell Inc Dallas, TX 6/22/90	Honoraria	$2,000.00	
American International New York, NY 7/17/90	Honoraria	$2,000.00	
Burson-Marsteller (on behalf of) Washington, DC 9/12/90	Honoraria	$1,000.00	
Spencer-Hecht Co. Washington, DC [illegible]/90	Honoraria	$1,000.00	
Boeing Company Philadelphia, PA 7/30/90	Honoraria	$2,000.00	
Credit Union Executives Society Las Vegas, NV 12/10/90	Honoraria	$2,000.00	
Institute of Sino American Affairs Taipei, Taiwan 12/14/90	Honoraria	$1,500.00	
Korea-US Council Seoul, Korea 12/18/90	Honoraria	$1,500.00	

Reporting Individual's Name
Gerald B. Solomon

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock		X							X						1		X									X
			George Wash Credit Union Accounts			X								X								X							
			182 Main Street, Dover, Delaware				X						X								X								
			Wright Patman Credit Union Washington, DC		X									X					X										
			Glens Falls National Bank Glens Falls, NY				X							X									X						
			North East Savings Bank Glens Falls, NY			X								X							X								
			North East Savings Bank Glens Falls, NY			X								X							X								
			Shearson-Lehman Fund Glens Falls, NY		X							X							X										
			Lake George Ventures Stock Lake George, NY			X						X							X										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Gerald B Solomon

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Second Home Lake George, NY						X						X										X					

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Reporting Individual's Name
Gerald B Solomon

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☒

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Glens Falls National Bank	Mortgage on Lake George property				X			
	Lake George Ventures Inc	Promissory note			X				

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Reporting Individual's Name
Gerald B Solomon

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☒

Example:	Mrs Joseph H Smith, Anytown, USA	Silver Platter $135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

	Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift
Examples:	Chicago Chamber of Commerce	Mar 2 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging self and spouse	
SEE ATTACHMENT				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Financial Disclosure Act

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PART VII
ATTACHMENT

NORTHRUP CORPORATION	Jan. 16 one way air from Washington, D.C. to Los Angeles food and lodging, self and spouse
THE TOBACCO INSTITUTE	Jan. 17 - 19 one way air from Los Angeles to Washington, D.C. 3 days, food and lodging, self and spouse
AMERICA MARITIME OFFICERS ASSOC.	Mar. 10 - 12 roundtrip air from Washington, D.C. to Dania, FL 3 days, food and lodging, self and spouse
MICHIGAN CREDIT UNION LEAGUE	May 29 roundtrip air from Washington, D.C. to Detroit food and lodging
L.T.V. AEROSPACE	June 22 one way air from Washington, D.C. to Dallas food and lodging
TEXTRON BELL INC.	June 23 one way air from Dallas to Washington, D.C. food
BOEING COMPANY	July 30 roundtrip air from Washington, D.C. to Philadelphia food
CREDIT UNION EXECUTIVES	Dec. 10 - 12 one way air from Washington, D.C. to Las Vegas 3 days, food and lodging, self and spouse
INSTITUTE OF SINO-AMERICA AFFAIRS	Dec. 12 - 16 one way air from Los Angeles to Tai Pei, Taiwan 4 days, food and lodging, self and spouse
KOREA-U.S. COUNCIL	Dec. 17 - 19 one way air from Tai Pei to Seoule to Washington, D.C. 3 days, food and lodging, self and spouse

Reporting Individual's Name
Gerald B. Solomon

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☒

Positions	Name of Organization
NONE	

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature]

DATE (Month, Day, Year): 5/9/91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 2:41
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

FLOYD DAVIDSON SPENCE
(Full Name)

2405 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: SC District: 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of South Carolina	Pension	$7,000	

For additional earned income, use next page

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Reporting Individual's Name
FLOYD DAVIDSON SPENCE

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1 000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5 000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																		Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X								X									X
			George Wash Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	Lexington State Bank (including IRAs)					X									X								X							
	Desree Lightle -Mortgage					X									X								X							
	Stephen Lyman -Mortgage					X									X							X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: FLOYD DAVIDSON SPENCE

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	123 acres on Lake Murray								X								None									
	Real Property-½int. in 2 unimproved lots-West Columbia		X														None									

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Reporting Individual's Name

FLOYD DAVIDSON SPENCE

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10 12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Lexington State Bank-co-signed note with son	Personal			X				
	Lexington State Bank-Loan for Spence Plantations	mortgage on 22½ acres-Lake Murray				X			

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Reporting Individual's Name

FLOYD DAVIDSON SPENCE

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

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Reporting Individual's Name
FLOYD DAVIDSON SPENCE

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
President	Spence Plantations, Inc. (uncompensated

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1970	State of South Carolina Retirement	Pension

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Floyd Davidson Spence

DATE (Month, Day, Year): May 14, 1991

GPO 1991 O-37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 3 12

HAND DELIVERED

John M. Spratt, Jr.
(Full Name)

1533 Longworth House Office Building, Washington, D. C. 20515
(Mailing Address)

Filer Status	X Member of the U.S House of Representatives	State S.Carolina District 5th	☐ Officer or Employee	Employing Office
Report Type	X Annual (May 15)	☐ Amendment	☐ Termination	Termination Date.

(Office Use Only) 14

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information see Instructions, page 10

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U. S. House of Representatives	Salary	$90,646.00	

For additional earned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Common stocks:																									
	York Bancshares, Inc.							X			X												X			
	Sonoco Products, Inc.					X					X										X					
	NCNB Corporation					X					X										X					Shares bought dividend re-investment.
	Spratt Insurance Agency *			X																						
	Springs Industries, Inc.		X								X								X							
	Exxon Corporation		X								X									X						
	Citicorp		X								X									X						
	Delta Woodside, Inc.		X								X								X							
	Waterman Marine Corp.	X									X															
	Real Estate:																									
	800-acre farm, Fort Mill, SC								X					X							X					
	FAA VORTAC Lease *											X														Lease renewed
	Farm house rental, J. Reid, Tenant											X								X						
	Former bank building, Fort Mill, SC *			X								X														
*	No rent or dividend paid in 1990.																									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Lot 87, River Pointe, Meck. Cty., NC					X																				
	Lake Wylie Plaza Associates, ltd ptr.			X							X										X					
	Bank accounts:																									
	Bank of York, Investment Mgt. Acct.			X									X								X					
	Bank of York, NOW Acct.		X										X							X						
	Bank of York, IRA			X									X							X						
S	Bank of York, IRA		X										X						X							
	Sgt-at-Arms, House of Reps, Acct.		X																							
S	Crestar Checking Acct., Washington, DC		X																							
	Life Insurance:																									
	New York Life			X							X												X			
	Home Life Ins. Co., NY			X							X											X				
	Life of Virginia		X								X								X							
	Promissory Notes:																									
	Spratt for Congress			X																						

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Thos. B & Alexa H. Spratt			X									X													
	Jos. H. Rainey			X									X													
	J. David Weeks			X									X													
	Law library		X																							
DC	NCNB Money Market Account				X								X									X				
DC	NCNB Daily Income Fund					X							X										X			
DC	U. S. Treasury Notes				X								X									X				
DC	AMR Corp.			X							X							X								Sale 1/18/90
DC	Anheuser-Busch Cos., Inc.			X							X							X								Sale 1/18/90
DC	Bankers Trust Co., New York			X							X								X							Sale 4/20/90
DC	Compaq Computer Corp.			X							X															Sale 1/18/90
DC	Duke Power Company			X							X										X					Purchase 1/18/90.
DC	Emerson Electric Co.			X							X									X						Purchase 1/18/90
DC	Gerber Products Co.			X							X								X							Purchase 1/18/90.
DC	MCI Communications Corp.			X							X							X								Sale 1/25/90

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Westinghouse Electric Corp.			X							X									X							Pur. 1/18/90
DC	Procter & Gamble Co.			X							X										X						
DC	Aluminum Company of America			X							X								X								
DC	Archer-Daniels-Midland Co.			X							X								X								
DC	Dayton Hudson Corp.			X							X								X								
DC	Phelps Dodge Corp.										X							X									Sale 4/12/90
DC	Georgia Pacific Corp.			X							X							X									Sale 4/12/90
DC	Tenneco, Inc.			X							X								X								
DC	Brunos, Inc.		X								X							X									Pur. 5/8/90
DC	NCR Corp.		X								X							X									Sale 5/8/90
DC	Wells Fargo & Company			X															X								Sale 9/19/90
DC	Royal Dutch Petroleum Co.			X							X								X								Sale 8/7/90
DC	Esco Electronics Corp.	X									X							X									Sale 12/7/90
DC	Federal Nat'l Mortgage Association		X									X						X									
DC	Consolidated Rail Corp.		X								X								X								Pur. 4/12/90

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Bank of York, common stock			X							X									X							
DC	Bank of York, savings accounts		X										X						X								

Reporting Individual's Name: John M. Spratt, Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	AMR Corp. common stock		X		1/18/90		X					
DC	Anheuser-Busch Cos., Inc. common stock		X		1/18/90		X					
DC	Compaq Computer Corp. common stock		X		1/18/90		X					
DC	Duke Power Company common stock	X			1/18/90		X					
DC	Emerson Electric Co. common stock	X			1/18/90		X					
DC	Consolidated Rail Corp.		X		4/12/90		X					

(continued)

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Bank of York	Pledge of stocks			X				
	New York Life Insurance Company	Cash value of life ins. policies			X				
	Home Life Ins. Co., New York	Cash value of life ins. policies		X					

Reporting Individual's Name: John M. Spratt, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Gerber Products Co. common stock	X			1/18/90		X					
DC	MCI Communications Corp. common stock	X			1/18/90		X					
DC	Westinghouse Electric Corp. common stock	X			1/18/90		X					
DC	U. S. Treasury Notes	X			4/12/90		X					
DC	Bankers Trust Co., New York	X			4/12/90		X					
DC	Brunos, Inc.	X			4/12/90	X						

(continued)

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
John M. Spratt, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Georgia Pacific Corp. common stock		X		4/12/90		X					
DC	NCR Corp. common stock	X			4/12/90		X					
DC	Phelps Dodge Corp. common stock		X		4/12/90		X					
DC	Wells Fargo & Company common stock	X			4/12/90		X					
DC	Brunos, Inc. common stock		X		5/08/90	X						
DC	NCR common stock		X		5/8/90	X						

(continued)

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name

John M. Spratt, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Royal Dutch Petroleum Co. common stock		X		8/07/90		X					
DC	Wells Fargo & Company common stock		X		8/07/90		X					
DC	Esco Electronics Corp. common stock (dividend from Emerson)	X			10/30/90	X						
DC	Esco Electronics Corp. common stock		X		12/07/90	X						
DC	NCNB Corp. common stock, acq. by dividend reinvestment	X			Quarterly	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

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S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name

John M. Spratt, Jr.

PART IV—TRANSACTIONS

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NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	Lease for VORTAC station acquired by Federal Aviation Adm. by											
	judicial condemnation of 80 acres, Fort Mill, SC				10/90		X					
	Sale of timber on farm, Fort Mill, SC, for pulpwood, Wm. Ardrey				4/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name: John M. Spratt, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors Corp.	Video cassettes of PBS Civil War Series	$175.00*
Public Broadcasting Corp.	Video cassettes of PBS Civil War Series	$175.00*
S. C. Electric Cooperatives	Framed print, "A Point of No Return"	$150.00
Winthrop College	Framed print, Tillman Hall, Winthrop College	$130.00
*Accepted as educational material for use in congressional office.		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Nat'l Leg. Educational Foundation	Feb 1-2,1990	Transportation, Lodging, Meals to Columbia, My., for	
		Democratic Issues Conference	
SC/NC Soc. of Opthalmologists	March 23-24, 1990	Transportation, Lodging, Meals to Charleston and	
		Return for speech to banquet.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
John M. Spratt, Jr.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization
N/A	

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) — Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) — Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app. 6, § 104 and 18 U.S.C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John M Spratt Jr.	May 15, 1991

GPO 1991 37-598 (m)

HAND DELIVERED

JOHN M. SPRATT, JR.
5th DISTRICT, SOUTH CAROLINA

1533 LONGWORTH BUILDING
WASHINGTON, D.C. 20515
(202) 225-5501

COMMITTEES
ARMED SERVICES
BUDGET
GOVERNMENT OPERATIONS
(ON LEAVE)

91 MAY 15 PM 3 12

Congress of the United States
House of Representatives
Washington, D.C. 20515

DISTRICT OFFICES
FEDERAL BUILDING
BOX 350
ROCK HILL, SOUTH CAROLINA 29731
(803) 327-1114

39 E. CALHOUN STREET
SUMTER, SOUTH CAROLINA 29150
(803) 773-3381

214 W. LAURENS STREET
BOX 964
LAURENS, SOUTH CAROLINA 29360
(803) 984-5325

May 15, 1991

The Clerk
U. S. House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, D.C. 20515

14

Dear Sir:

I am enclosing my Financial Disclosure Statement for 1990.

Prior to completing this statement, I requested an opinion of the Committee on Official Standards as to the disclosure of two irrevocable trusts created on January 31, 1990, by my sister, Jane S. McColl, and my brother-in-law, Hugh L. McColl, Jr., for the benefit of their children, Hugh L. McColl, III, John S. McColl, and Jane B. McColl. The trusts are grantor retained-income trusts, and I serve as trustee, without compensation, of each trust. The trust created by Hugh L. McColl, Jr. owns 11,750 shares of NCNB Corporation common stock; the trust created by Jane S. McColl owns 12,250 shares of NCNB Corporation common stock.

I was advised by Edward Hosken of the Committee on Official Standards that neither the trusteeship nor my ownership in trust of this stock was required to be disclosed on the Financial Disclosure Statement. However, I think it is appropriate to record the fact that I am trustee of these two trusts, and I am writing this letter to serve that purpose.

I am sending a copy of this letter to the Committee on Official Standards.

Sincerely,

John Spratt

John M. Spratt, Jr.

JMS:jms

JOHN M. SPRATT, JR.
5th DISTRICT, SOUTH CAROLINA

1533 LONGWORTH BUILDING
WASHINGTON, D.C. 20515
(202) 225-5501

COMMITTEES

ARMED SERVICES
BUDGET

GOVERNMENT OPERATIONS
(ON LEAVE)

Congress of the United States
House of Representatives
Washington, D.C. 20515

DISTRICT OFFICES

FEDERAL BUILDING
BOX 350
ROCK HILL, SOUTH CAROLINA 29731
(803) 327-1114

30 E. CALHOUN STREET
SUMTER, SOUTH CAROLINA 29150
(803) 773-3362

214 W. LAURENS STREET
BOX 964
LAURENS, SOUTH CAROLINA 29360
(803) 984-5323

July 1, 1991 HAND DELIVERED

The Honorable Louis Stokes
Committee on Official Standards
U. S. House of Representatives
Suite HT-2, U. S. Capitol
Washington, D. C. 20515

MC (16)

Re: Financial Disclosure Statement for 1991

Dear Mr Chairman:

I received your letter noting apparent deficiencies in my Financial Disclosure Statement for 1990, and I am responding to the items you cited. The checklist enclosed with your letter notes the following "apparent deficiencies:"

(1) Under Part II, the "value of VORTAC lease." The Federal Aviation Administration leases approximately 80 acres in the center of my farm in Fort Mill, South Carolina. The lease binds me as lessor for 5 years, but allows the FAA the option of electing each year whether to renew by notifying me thirty days before the anniversary date, which is October 1. When I was elected to Congress, I notified the FAA of my election and informed the FAA that I could no longer accept rent under our existing lease. Your committee informed me that I could not contract with the FAA, but that the FAA could acquire a leasehold interest in my property by judicial condemnation. The FAA received the same advice from the Justice Department. Consequently, the FAA brought condemnation proceedings to acquire a five-year lease in 1985, and during 1990, the FAA brought condemnation proceedings again to acquire another five-year lease. Because of the time involved in obtaining an appraisal and completing the condemnation proceeding, the condemnation case was not concluded in 1990, and no rent was paid to me by the FAA in 1990. Thus, under income from the FAA lease, there is no entry for income since there was no rental income in 1990. In 1991, rental income will be doubled due to the fact that I received 1990 rent in April 1991 after entry of the order for judgment and will receive rent for the term commencing October 1, 1991, in November or December 1991. Except for annual rent, the lease has no value. The underlying land is already reported in the value of my farm, and the improvements on the leasehold belong to the FAA. I do not see how the rent can be capitalized to establish a value for the lease, because the lease is short-term and the

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COMMITTEE ON STANDAR

FAA as lessee is only bound to pay rent only if it elects to renew. Under the terms of the lease, I retain the right to use the leasehold property for agricultural and other purposes not inconsistent with the operation of the VORTAC facility. Therefore, the leased land is included as part of the 800-acre farm that I list and value separately, but the lease is shown separately because it is a source of income

(2) Under Part II, "farm house rental." This frame house is also located on my farm at the intersection of Brickyard Road and an unpaved road known as River Bottoms Road. There are no fixed boundaries to the parcel on which the house sits, and the parcel is included within the 800-acre farm which is listed and valued separately. I have added to the Disclosure Statement a separate value for the house; however, an appraiser would disregard the value of the house in appraising the farm; because if the land were sold at its highest and best use, the house would be of no value.

(3) Under Part III, Lot 87 River Pointe Subdivision, Mecklenburg County, North Carolina. This is a vacant lot in a residential subdivision, purchased as an investment and being held for resale. Since the lot yields no income, there is no "Type of Income" or "Amount of Income" applicable to the investment. Thus these blocks were left blank on my disclosure statement. Nevertheless, I have checked Category I under "Amount of Income" to indicate "none."

(4) Under Part III, Checking Accounts with Sergeant-at-Arms and Crestar Bank in Washington, D. C. Neither account bears interest, so there is no "Type of Income" or "Amount of Income" to list for either. Nevertheless, I have checked Category I under "Amount of Income" to indicate "none."

(5) Under Part III, Promissory Note from Spratt for Congress. Under "Type of Income," there is no entry because the note is not interest-bearing; it is a note for repayment of principal only. Under "Amount of Income," there is no entry for the same reason. Nevertheless, I have checked off Category I under "Amount of Income" to indicate "none."

(6) Under Part III, Promissory Notes from J David Weeks; Thomas B. Spratt, III, and Alexa H Spratt; and Joseph H. Rainey. Under "Type of Income," interest is checked because the notes or debts are interest-bearing. However, no interest was paid on any of these obligations during 1990; so there is no entry for "Amount of Income." Category I has been checked for all entries to indicate "none."

(7) Under Part III, Law Library. Under "Type of Income," there is no entry because my law library yields no income of any kind. For the same reason, there is no entry under "Amount of Income," but I have checked Category I to indicate "none."

(8) Under Part III, Common Stock in Waterman Marine Corp. Under "Type of Income," there is an entry because this single share of stock may pay a dividend. However, there is no entry under "Amount of Income," because it has not paid a dividend. I have checked Category I to indicate "none "

I trust that the information furnished by this letter and the additional entries on my financial disclosure statement resolve each of the deficiencies you noted. If further information is required, please let me know.

Respectfully

John Spratt

John M Spratt Jr
Member of Congress

JMSj:

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 3 12

HAND DELIVERED

John M. Spratt, Jr.
(Full Name)

1533 Longworth House Office Building, Washington, D. C. 20515
(Mailing Address)

HAND DELIVERED

Filer Status	[X] Member of the U S House of Representatives	State S.Carolina District 5th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

Mc

(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U. S. House of Representatives	Salary	$90,646.00	

For additional earned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	Common stocks:	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
✓	York Bancshares, Inc.							X			X												X				
✓	Sonoco Products, Inc.					X					X										X						
✓	NCNB Corporation					X					X										X						Shares bought, dividend re-investment.
✓	Spratt Insurance Agency *			X																							
✓	Springs Industries, Inc.		X								X								X								
✓	Exxon Corporation		X								X									X							
✓	Citicorp		X								X									X							
✓	Delta Woodside, Inc.		X								X								X								
✓	Waterman Marine Corp.	X									X							X									
	Real Estate:																										
18 acre	800-acre farm, Fort Mill, SC								X					X							X						
✓	FAA VORTAC Lease *	?										X															Lease renewed.
✓	Farm house rental, J. Reid, Tenant	? X										X								X							
✓	Former bank building, Fort Mill, SC *			X								X						X									
*	No rent or dividend paid in 1990.																										

Reporting Individual's Name: John M. Spratt, Jr.

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Lot 87, River Pointe, Meck. Cty., NC					X												X									
	Lake Wylie Plaza Associates, ltd ptr.			X							X										X						
	Bank accounts:																										
	Bank of York, Investment Mgt. Acct.			X									X								X						
	Bank of York, NOW Acct.		X										X							X							
	Bank of York, IRA			X									X							X							
S	Bank of York, IRA		X										X						X								
	Sgt-at-Arms, House of Reps, Acct.		X															X									
S	Crestar Checking Acct., Washington, DC		X															X									
	Life Insurance:																										
	New York Life			X							X												X				
	Home Life Ins. Co., NY			X							X											X					
	Life of Virginia		X								X								X								
	Promissory Notes:																										
	Spratt for Congress			X														X									

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Reporting Individual's Name: John M. Spratt, Jr.

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Thos. B & Alexa H. Spratt			X									X					X									
	Jos. H. Rainey			X									X					X									
	J. David Weeks			X									X					X									
	Law library		X															X									
DC	NCNB Money Market Account				X								X									X					
DC	NCNB Daily Income Fund					X							X										X				
DC	U. S. Treasury Notes				X								X									X					
DC	AMR Corp.			X							X							X									Sale 1/18/90
DC	Anheuser-Busch Cos., Inc.			X							X							X									Sale 1/18/90
DC	Bankers Trust Co., New York			X							X								X								Sale 4/20/90
DC	Compaq Computer Corp.			X							X																Sale 1/18/90
DC	Duke Power Company			X							X										X						Purchase 1/18/90.
DC	Emerson Electric Co.			X							X									X							Purchase 1/18/90
DC	Gerber Products Co.			X							X								X								Purchase 1/18/90.
DC	MCI Communications Corp.			X							X							X									Sale 1/25/90

Reporting Individual's Name: John M. Spratt, Jr.

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Westinghouse Electric Corp.			X							X									X						Pur. 1/18/90
DC	Procter & Gamble Co.			X							X										X					
DC	Aluminum Company of America			X							X								X							
DC	Archer-Daniels-Midland Co.			X							X								X							
DC	Dayton Hudson Corp.			X							X								X							
DC	Phelps Dodge Corp.										X							X								Sale 4/12/90
DC	Georgia Pacific Corp.			X							X							X								Sale 4/12/90
DC	Tenneco, Inc.			X							X								X							
DC	Brunos, Inc.		X								X							X								Pur. 5/8/90
DC	NCR Corp.		X								X							X								Sale 5/8/90
DC	Wells Fargo & Company			X															X							Sale 9/19/90
DC	Royal Dutch Petroleum Co.			X							X								X							Sale 8/7/90
DC	Esco Electronics Corp.	X									X							X								Sale 12/7/90
DC	Federal Nat'l Mortgage Association		X									X						X								
DC	Consolidated Rail Corp.		X								X								X							Pur. 4/12/90

Reporting Individual's Name: John M. Spratt, Jr.

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
		Category of Value (X)									Type of Income (X)						Category of Amount of Income (X)							
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
DC	Bank of York, common stock			X							X									X							
DC	Bank of York, savings accounts		X										X						X								

4280

Reporting Individual's Name

John M. Spratt, Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	AMR Corp. common stock		X		1/18/90		X					
DC	Anheuser-Busch Cos., Inc. common stock		X		1/18/90		X					
DC	Compaq Computer Corp. common stock		X		1/18/90		X					
DC	Duke Power Company common stock	X			1/18/90		X					
DC	Emerson Electric Co. common stock	X			1/18/90		X					
DC	Consolidated Rail Corp.		X		4/12/90		X					

(continued)

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Bank of York	Pledge of stocks			X				
	New York Life Insurance Company	Cash value of life ins. policies			X				
	Home Life Ins. Co., New York	Cash value of life ins. policies		X					

4281

Reporting Individual's Name: John M. Spratt, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Gerber Products Co. common stock	X			1/18/90		X					
DC	MCI Communications Corp. common stock	X			1/18/90		X					
DC	Westinghouse Electric Corp. common stock	X			1/18/90		X					
DC	U. S. Treasury Notes	X			4/12/90		X					
DC	Bankers Trust Co., New York	X			4/12/90		X					
DC	Brunos, Inc.	X			4/12/90	X						

(continued)

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name: John M. Spratt, Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Georgia Pacific Corp. common stock		X		4/12/90		X					
DC	NCR Corp. common stock	X			4/12/90		X					
DC	Phelps Dodge Corp. common stock		X		4/12/90		X					
DC	Wells Fargo & Company common stock	X			4/12/90		X					
DC	Brunos, Inc. common stock		X		5/08/90	X						
DC	NCR common stock		X		5/8/90	X						

(continued)

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

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Reporting Individual's Name

John M. Spratt, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
DC	Royal Dutch Petroleum Co. common stock		X		8/07/90		X					
DC	Wells Fargo & Company common stock		X		8/07/90		X					
DC	Esco Electronics Corp. common stock (dividend from Emerson)	X			10/30/90	X						
DC	Esco Electronics Corp. common stock		X		12/07/90	X						
DC	NCNB Corp. common stock, acq. by dividend reinvestment	X			Quarterly	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name

John M. Spratt, Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	Lease for VORTAC station acquired by Federal Aviation Adm. by											
	judicial condemnation of 80 acres, Fort Mill, SC				10/90		X					
	Sale of timber on farm, Fort Mill, SC, for pulpwood, Wm. Ardrey				4/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name: John M. Spratt, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corp.	Video cassettes of PBS Civil War Series	$175.00*
Public Broadcasting Corp.	Video cassettes of PBS Civil War Series	$175.00*
S. C. Electric Cooperatives	Framed print, "A Point of No Return"	$150.00
Winthrop College	Framed print, Tillman Hall, Winthrop College	$130.00
*Accepted as educational material for use in congressional office.		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Nat'l Leg. Educational Foundation	Feb 1-2,1990	Transportation, Lodging, Meals to Columbia, My., for	
		Democratic Issues Conference	
SC/NC Soc. of Opthalmologists	March 23-24, 1990	Transportation, Lodging, Meals to Charleston and	
		Return for speech to banquet.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
John M. Spratt, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization
N/A	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the "three tests for exemption"? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year)
May 15, 1991

GPO: 1991 — 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Harley O. Staggers, Jr.
(Full Name)

1323 Longworth Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives	State WV District Second	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Dupont Electronics Image Systems, Inc.	Spouse Salary	NA	
	Imagitex, Inc.	Spouse Salary	NA	
	Chicago Mercantile Exchange (4-27-90)	Honorarium	$750	
	Board of Trade of City of Chicago (4-27-90)	Honorarium	$750	
	Mortgage Bankers Association of America (2-23-90)	Honorarium	$1000	
	Tobacco Institute (12-10-90)	Honorarium	$2000	

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For additional earned income, use next page

Reporting Individual's Name

Harley O. Staggers, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
DC	Farmers & Merchants Bank, Keyser, WV				X										X					X										
	National Bank of Keyser, WV (Savings account and IRA)					X									X							X								
S	Security National Bank and Trust, Wheeling, WV (Spouse's IRA)				X										X						X									
	Marriott Corporation Stock				X								X							X										
S	Unisys Corporation Stock				X								X							X										
	WV Housing Development Fund Bond				X										X						X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

Harley O. Staggers, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income											BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Perpetual American, Alexandria, VA		X										X					X								
JT	1/3 Interest In .24 Acres on Rt. 28 in Fort Ashby, WV		X									X							X							
JT	1/3 Interest in Lots 50,51,52,53 190 Center Street, Keyser, WV			X								X							X							
JT	1/5 Interest in Unit 110, Beaver Ridge Resort, Tucker County, WV			X								X							X							X
S	Ohio Edison Stock	X									X							X								

Reporting Individual's Name

Harley O. Staggers, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Unit 110, Beaver Ridge Resort, Tucker County, WV	X			2-23-90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	Farmers & Merchants Bank, Keyser, WV (1/3 Liability)	Mortgage on .24 Acres on Rt. 28 Fort Ashby, WV		X					
JT	First National Bank of Piedmont, WV (1/3 Liability)	Mortgage on Lots 50,51,52,53 190 Center St., Keyser, WV			X				
JT	Peoples National Bank, Martinsburg, WV (1/3 Liability)	Mortgage on Unit 110, Beaver Ridge Resort, Tucker County, WV		X					

Reporting Individual's Name

Harley O. Staggers, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors/ Association for Public Broadcasting	Civil War videotapes	$120

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
Chicago Board of Trade	Apr. 29-30 1990	Roundtrip Air from Charleston, WV to Chicago including room and meals	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name

Harley O. Staggers, Jr.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Board of Directors	West Virginia Aid, Inc.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Harley O. Staggers Jr.	May 14, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:22
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Richard H. Stallings
(Full Name)

116 Birch Avenue
(Mailing Address)

Rexburg, Idaho 83440

Filer Status	[X] Member of the U.S. House of Representatives	State: Idaho District: 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Medical Association, Wash., D.C. (5/7/90)	Speech & seminar	$1,000.00	
	American Nuclear Energy Council, Wash., C.D. (4/3/90)	Speech	300.00	
	American Nuclear Energy Council, Wash., D.C. (6/1/90)	Speech	1,000.00	
	Responsive Energy Technology Symposium and International Exhibit, La Canada, CA. (8-15-90)	Speech	1,000.00	
	Lipsen, Whitten & Diamond, Wash., C.D. (7-31-90)	Speech	1,000.00	
	Chicago Board of Trade, Chicago, Ill. (9-24-90)	Speech	750.00	
	Chicago Mercantile Exchange, Chicago, Ill. (9-24-90)	Speech	750.00	
	Waste Management, Inc., Chicago, Ill. (9-24-90)	Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name
Richard H. Stallings

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

S, DC, JT	BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	BLOCK B Valuation of Asset: Category of Value (X) A: none (or less than $1,001)	B: $1,001 - $15,000	C: $15,001 - $50,000	D: $50,001 - $100,000	E: $100,001 - $250,000	F: $250,001 - $500,000	G: $500,001 - $1,000,000	H: over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I: none (or less than $201)	II: $201 - $1,000	III: $1,001 - $2,500	IV: $2,501 - $5,000	V: $5,001 - $15,000	VI: $15,001 - $50,000	VII: $50,001 - $100,000	VIII: $100,001 - $1,000,000	IX: over $1,000,000	Block D Transaction (X)
S	Examples: ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Home, 116 Birch, Rexburg, Idaho				X							X									X						
	Property sold on escrow, 1265 East 2550 North, Ogden, Utah		X							X			X				Principal & Interest			X							
	2½ acres undeveloped land contract, Lyman, Idaho		X							X			X				Principal & Interest			X							
	Bank Accts. Beehive Federal Credit Union, Rexburg, Id.;		X										X						X								
	First Federal Savings & Loan, Ogden, Utah	X											X					X									
	IRAs Beehive Federal Credit Union		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Richard H. Stallings

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (Y)
S, DC, JT																									
Deseret Mutual Retirement Plan, Ricks College, Rexburg, Idaho			X									X						X							

Financial Disclosure A-2(a)

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Reporting Individual's Name

Richard H. Stallings

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1 000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover Del				X			
	Firemans Fund Mtg. Corp.	Mortgage on 116 Birch, Rexburg, ID.		X					

Reporting Individual's Name
Richard H. Stallings

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member officer or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
PBS Video, Alexandria, Virginia	Civil War Video Series	$189.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
American Medical Assn.	3/16-3/18	Round trip air travel from Wash., D.C. to Naples, Florida; 3 days' food & lodging for self and spouse	
Responsive Energy Technology Symposium & International Exhibit	6/15-6/16	Air travel Idaho Falls to San Diego to D.C., food & lodging	
Idaho Grain Growers	7/6	Air travel Boise to Spokane to Boise, meal	
Utah Idaho Farmers Union	2/9	Air travel Boise to Salt Lake City to Boise, meal	
Waste Management, Inc.	9/24	Air travel D.C. to Chicago and return, meal	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Richard H. Stallings

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Advisory Board Member	Greenthumb, Inc., Buhl, Idaho

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
1984 to present	Ricks College, Rexburg, Idaho	Unpaid Sabattical from position as college professor, re-evaluated each year

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and wilfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Richard H. Stallings	May 15, 1991

GPO 1991 37-598 (m)

Richard H. Stallings

PARTS II and III - EXPLANATION

x	Property sold on escrow, 1265 East 2550 North, Ogden, Utah	Principal and interest still due
x	Land contract, Lyman, Idaho	Principal and interest still due

PART VII-- "Reimbursements" (Continued)

Western Dairymen Coop., Inc.	1/9-1-10	Meals and lodging, Salt Lake City
AT&T	1/29	Air travel Wash., D.C. to Newark, New Jersey and return, meal
Idaho Retailers Association	9/24	Lodging in Sun Valley, Idaho

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:12

Honorable Fortney Pete Stark
(Full Name)

239 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status [X] Member of the U.S. House of Representatives — State CA District 09 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

HAND DELIVERED

MC (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
02/08/90	Siemens Corporation	Speech	$ 2000	
02/22/90	College of American Pathologists	Speech	$ 2000	
02/27/90	Biomedical Marketing Association	Speech	$ 2000	
03/09/90	Mutual Life Tax Committee	Speech	$ 2000	
03/12/90	Group Health Association	Speech	$ 2000	
03/15/90	The Washington Post	Article	$ 200	Assigned to Staff -research Expense
04/19/90	American Assn. of Preferred Providers	Speech	$ 2000	
04/19/90	Amer. Society of Consultant Pharmacists	Speech	$ 2000	
05/18/90	National Assn. of Retail Druggists	Speech	$ 1000	

For additional earned income, use next page

Reporting Individual's Name

Hon. Fortney Pete Stark

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)		Type	Amount	Mark (X) if directed or paid to charity
05/18/90	Blue Cross/Blue Shield of Missouri	Speech	$ 2000	
05/29/90	McKinsey & Company, Inc.	Speech	$ 2000	
05/31/90	Wine Institute	Speech	$ 1000	
06/06/90	Capital Legislative Services, Inc.	Speech	$ 2000	
06/05/90	Seyfarth, Shaw, Fairweather, et.al	Speech	$ 2000	
06/11/90	American Chiropratic Association	Speech	$ 750	
AND 06/11/90	International Chiroprators Association	Speech	$ 750	
06/20/90	American Council of Life Insurance	Speech	$ 1000	
05/31/90	American Protestant Health Association	Speech	$ 2000	X
06/27/90	The Catholic Health Assn. of the US	Speech	$ 500	X
08/03/90	American Health Care Association	Speech	$ 2000	X
09/04/90	New York Times	Article	$ 150	Assigned to Staff/research and expense
09/24/90	Nat'l Assn. of Medical Equip. Suppliers	Speech	$ 2000	X
09/27/90	Nat'l Renal Administrators Association	Speech	$ 2000	X
10/01/90	Verner, Liipfert, Et.al	Speech	$ 2000	X

Reporting Individual's Name
Hon. Fortney Pete Stark

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
	Duplex - Washington, D.C. 316 2nd St. S.E.								X				X											X				
	Retirement Plan, U. S. Congress					X																						
	WPFCU Savings		X											X					X									
	Aardolie Oil Co. Prod. Int.					X												Royalty				X						
	Note From Stark Investment Co									X				X												X		

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hon. Fortney Pete Stark

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTERESTS*	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S. DC. JT																										
Fair Market Value of Equity (25%) Shopping Center, Columbus, Ohio							X				X						X									
Stark Investment Co; See Attached Detail - PP 3																										
Amer. Health Properties REIT					X					X											X					
Federal Realty Trust REIT					X					X											X					
IRT Properties REIT				X						X											X					
Dial REIT				X						X											X					
Grubb & Ellis REIT						X				X												X				X
Vanguard GNMA Mutual Fund					X					X												X				
Real Estate Sec. Inc. Fund				X																		X				X

Reporting Individual's Name
Hon. Fortney Pete Stark

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
Detail of Share of Assets and Unearned Income of Stark Investment Company	S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Interest Checking Charles Schwab					X								X							X							
Warehouse S.S.F., CA.									X			X													X		
Damson Oil Co., Texas					X												Oil&Gas			X							
Stark Papini Real Estate Ptr.:																											
1. El Dorado, Land, Stockton, CA.						X												X									
2. Whitney Dev., Various, CA.							X											X									
3. Junction Dev., Land, Truckee, CA.		X (1)																X									
4. Oil & Gas:																											
a. Aardolie Oil, Texas			X														Oil&Gas	X									
b. R. Richey Oil, Texas				X													Oil&Gas				X						
Notes Rec'b.: Jeffrey Stark				X														X									
Notes Rec'b.: Phil Stark			X										X						X								
Notes Rec'b.: Howard Dick (Carmichael Duplexs)				X									X	X							X						
Notes Rec'b.: Ken Garcia (Cancl. During Yr.)		X																X									
Auto			X															X									

(1) Written off during year.

Detail of Share of Transactions & Liabilities
of Stark Investment Company

Reporting Individual's Name
FORTNEY H. STARK

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Fortney H. Stark	Note Payable						X	
	Confederation Life Ins. Co.	Mortgage, Warehouse, S.S.F., CA.							X
	General Electric (Paid Off During Year)	Assumed Liability-Genmark		X					
	Bernard Litchield	Assumed Liability-Genmark			X				
	John Reagor	General Liability	X						

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Reporting Individual's Name

Hon. Fortney Pete Stark

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO DAY YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10 12 90			X				
	Real Estate Equity Fund		X		2-12-90		X					
	" " " "		X		2-21-90	X						
	Grubb & Ellis REIT	X			1-17-90			X				
	" " " "	X			2-9-90		X					
	" " " "	X			9-6-90		X					

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Citicorp Savings and Loan of St. Louis, Mo.	Mortgage on 316 2nd St. SE Washington, D.C.			X				
	Charles Schwab & Co.	Margin Account					X		
	Sovran Bank of Maryland	Equity Line on 316 2nd St. SE Washington, DC			X				

Reporting Individual's Name
Hon. Fortney Pete Stark

PART IV—TRANSACTIONS -2

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Grubb & Ellis REIT	X			10-01-90		X					
	" " " "	X			10-03-90	X						
	" " " "	X			10-05-90		X					
	" " " "	X			11-01-90		X					
	" " " "	X			11-07-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

4308

Reporting Individual's Name
Hon. Fortney Pete Stark

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government.* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
McKinsey & Company	May 18, 1990	Roundtrip Air Travel from Wash., DC to LA for Speech	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342).

Reporting Individual's Name
Hon. Fortney Pete Stark

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
	(1) Stark Investment Company, Hayward, CA
Partner in:	(2) The Kingsdale Company, Columbus, Ohio
	(3) Slidell Partnership, Dallas, Texas
	(4) Koin Partnership, Dallas, Texas
	(5) Whitney Development Company, Walnut Creek, CA
	(6) Stark/Panini Real Estate Investments, Walnut Creek, CA
President & Director:	(7) Pete Stark Foundation, Hayward, CA

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [ ] NA [X]

Dissolution of marriage, filed 05-03-91

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Pete Stark

DATE (Month, Day, Year): 5/15/91

GPO 1991 37 598 (m)

FORTNEY H. (PETE) STARK
9TH DISTRICT, CALIFORNIA

COMMITTEES
WAYS AND MEANS
DISTRICT OF COLUMBIA
SELECT NARCOTICS

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES
WASHINGTON, D.C. 20515

May 22, 1991

HAND DELIVERED

1

MC

The Honorable Louis Stokes
Chairman
U.S. House of Representatives
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

In regard to your request for an explanation of transactions in your letter of May 21, 1991; the Aardolie Oil Company production interest is that interest referred to in 1989 as "Oil Exploration Partnership, Dallas, Texas". The Aardolie Oil Company is a more precise way of defining that interest. Would you, therefore, add the words "Dallas, Texas" to the Aardolie Oil reference?

The Walnut Creek, California condominium shown in 1989 Report was shown in 1989 in error. I still own it, but it is a personal residence and has never generated any rental income, and, as I understand the rules, does not need to be listed.

If this explanation is not satisfactory or if you'd like further details, please let me know.

Sincerely,

Pete Stark

Pete Stark
Member of Congress

FHS/em

THIS STATIONERY PRINTED ON PAPER MADE WITH RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY -9 PM 3:55
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only) 8

Clifford B. Stearns
(Full Name)

1123 Longworth House Office Building
Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U S House of Representatives	State Florida District 6	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Real Estate Sales	Commissions	$0-Gross $(2,994)Net	
	First Silver Springs, Inc.	Salary- wife	N/A	

For additional earned income, use next page

4312

Reporting Individual's Name

Clifford B. Stearns

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	Barnett Bank, Ocala, FL		X										X				X									
	Dean Witter/ First Jersey			X									X							X						
	Caldwell Banker(closed 12/31/90)	X											X					X								
	Chicago Title & Trust Co						X						X							X						
	Sun Bank, Ocala, FL			X									X							X						
	Turner Broadcasting Stock *	X												X				X								*

For additional assets and unearned income, use next page

* Turner stock sold on 5/16/90. Transaction amount was less than $1,000.00

4313

Reporting Individual

Clifford B. Stearns

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
Identify each asset and/or income source of yours, your spouse (S) and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S. DC. JT																									
71.70% Interest, Silver Springs Inn,Ltd.,a Partnership, Silver Springs,FL(motel:cash, land,building,furniture, equipment, debt)				x								x								x					
Silver Springs Inn,Ltd.(above)																partnership income	x								
46.58% Interest,Rock Creek Park Ltd, a Partnership ,Silvers Springs, FL(motel:cash,land,building, furniture, equipment, debt)					x							x								x					
Rock Creek Park,Ltd.(above)																partnership income	x								
53.00% Interest,First Davenport, Inc.,an S Corp.,Ocala,FL(motel: cash,land,building,furniture, equipment, debt)				x								x	x								x x				x

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clifford B.Stearns

BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)	S, DC JT	BLOCK B Valuation of Asset: Category of Value (X) A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001* - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT*	INTEREST	CAPITAL GAINS	EXCEPTED TRUST*	QUALIFIED BLIND TRUST*	Other Income (Specify type)	Category of Amount of Income (X) I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
First Davenport,Inc.(above)																	S Corp Income						X				X
33.93% Interest,Potomac Park,Inc. an S Corp.,Gainesville,FL(motel: cash,land,furniture,building, equipment, debt)				X									X							X							
Potomac Park,Inc.(above)																	S Corp Income	X									
100% Interest,First Silver Springs, Inc.,a Corporation,Silver Springs FL(motel:cash,land,building, furniture,equipment,debt)								X										X									
100% Interest,Stearns House,Inc. Management,converted to an S Corp on 11/1/90(management company:cash & furniture)				X							X		X					X		X							
Stearns House,Inc.,(above)																	S Corp Income	X									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Clifford B. Stearns

BLOCK A Asset and/or Income Source — Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)	S, DC, JT	BLOCK B Valuation of Asset — Category of Value (X): A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income — Type of Income (X): DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X): I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
3 Rental Apartments, Holman Lane, Old Greenwich, CT		x										x						x (net)				x (gross)				x
3 Rental Apartments (same as above)														x											x	x
Rental Building (Restaurant), Silver Springs, FL							x					x										x (gross) x (net)				
Rental Building (Office), Silver Springs, FL					x							x									x	x (gross) x (net)				
Rental Triplex (Residential), Silver Springs, FL						x						x									x	x (gross) x (net)				
Note Receivable: Grace Presbyterian Church			x										x					x								
Note Receivable: Friends of Cliff Stearns					x								x									x				

Reporting Individual's Name
Clifford B. Stearns

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	3 Rental Apartments, Old Greenwich, CT		X		9-19-90					X		
	First Davenport, Inc.,Ocala, FL(assets of the corporation were sold for cash and mortage receivable)		X		4-16-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, De				X			
	Union Trust Greenwich, CT(satisfied as of 12/31/90)	Mortgage on 3 Rental Apartments, Old Greenwich,CT			X				
	Alliance (f/k/a First Union Bank) Ocala, FL	Mortage on Rental Offices Silver Springs,FL		X					
	Sun Bank, Ocala, FL	Mortage on Rental Triplex and Restaurant, Silver Springs,FL				X			
	First Silver Springs, Inc.	Demand Loan		X					
	Stearns House, Inc., Management	Demand Loan	X						

Page 4 Continued ↓

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Reporting Individual's Name
Clifford B. Stearns

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors Corp	"The Civil War" video tape set, from the historical series aired over the Public Broadcasting Service*	$ 120
	*Although an interpretative ruling from the House Committee on Standards of Official Conduct indicated that these tapes, which were offered to all Members, did not have to be disclosed, they are listed here in the interest of full public disclosure.	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☒

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Clifford B. Stearns

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
General and Limited Partner	Silver Springs Inn,Ltd.,& Rock Creek Park, Ltd.
President	First Davenport, Inc. & Potomac Park, Inc.
President	First Silver Springs, Inc.,& Stearns House, Inc. Management

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because [illegible] (See Instructions page 5.) Yes ☐ No ☒ NA

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement [illegible] to [illegible] requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any [illegible] who knowingly and willfully falsifies or conceals a material fact or willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § [illegible]).

SIGNATURE OF REPORTING INDIVIDUAL: Clifford B. Stearns

DATE (Month, Day, Year): May 9, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 PM 4:05

HAND DELIVERED

Charles W. Stenholm
(Full Name)

1226 Longworth Building
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U S House of Representatives	State Texas District 17th District	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 12

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
PLEASE SEE ATTACHED PAGES - Attachment 1 - 3				

For additional earned income, use next page

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Reporting Individual's Name

Charles W. Stenholm

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																					Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)										Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Ag program payments	Crop Insurance	Other	Oil & Gas Royalties	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X											X									X
			George Wash. Credit Union Accounts			X								X											X							
			162 Main Street, Dover, Delaware				X						X											X								
JT	Farmland - Buildings & Equipment 840 acres - Jones County, Texas							X				X	X					X	X	X							X					
JT	Double S. Farms, Inc.						X															X										
S	Farmland - Mineral Interests 37.6 acres - Wheeler County, Tex.				X													X			X					X						
JT	S & S Enterprises (40.5 acres)				X																	X										
	Home, Arlington, Va.							X														X										
	IRA Investors Diversified Services				X																	X										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles W. Stenholm

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)								Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Ordinary Income/Loss	Oil & Gas Royalties	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	2880 shares Independent Bank Shares	X																		X								
JT	Co-Op Stocks			X							X										X							
JT	Double S Santa Gertrudis Ranch Partnership 50%			X													X			X								
JT	S & S Feeders 50% partnership	X															X			X								
JT	Oklahoma Oil & Gas Limited Partnership			X														X		X								
S	Dessa Carmen Watson Estate Cynthia Ann Stenholm					X											X							X				
DC	Courtney Ann Stenholm Trust			X													X						X					
JT	First National Bank		X										X								X							
JT	First Virginia Bank		X										X								X							
JT	Sergeant at Arms House of Representatives	X																		X								
JT	4755 John Deere tractor				X												X			X								
JT	1990 Buick LeSabre			X													X							X				

Reporting Individual's Name

Charles W. Stenholm

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	4755 John Deere tractor	X			11/15/90			X				
JT	1990 Buick LeSabre	X			6/30/90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First National Bank - Stamford, Tex.	Farm home improvement	X						
JT	FNB - Sweetwater, Tex.	Personal		X					
JT	FNB - Haskell, Tex.	Business - farmland		X					
JT	Equitable Life Assurance	Business loan - farm				X			
JT	Rolling Plains Production Credit Assoc.	Business loan - farm		X					
JT	Deere Credit Services	Business loan - tractor			X				

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Reporting Individual's Name
Charles W. Stenholm

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
PLEASE SEE ATTACHED PAGES - Attachments 4 - 6				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Charles W. Stenholm

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
President Partner	Double S. Farms S & S Feeders
Partner Partner	Double S Santa Gertrudis Ranch S & S Enterprises
Advisory Director	First National Bank - Stamford

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependant child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app. 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Charles W. Stenholm	5-15-91

GPO 1991 37-598 (m)

Attachment - 1

PART I - EARNED INCOME, INCLUDING HONORARIA

Received Calif. Cattlemen's Assoc., Anaheim, Cal.(1/12/90)	Speech	$1750.
Nat. Milk Producers Fed., Nashville, Tenn.(1/9/90)	Speech	2000.
Monsanto Co., St. Louis, Mo. (2/26/90)	Speech	1500.
Nat. Fertilizer Solutions, Las Vegas,Nev.(1/25/90)	Speech	1000.
Amer. Assoc. of Crop Insurers,Wash.,D.C.(1/11/90)	Speech	1000.
Ciba-Geigy Corp., Greensboro, N.C. (1/3/90)	Speech	1000.
Nat. Turkey Federation,San Diego,Calif.(2/12/90)	Speech	2000.
Nat.Assoc. of Wheat Growers,San Antonio,Tx.(1/29/90)	Speech	1000.
Amer. Beekeeping Fed.,Inc.,Las Vegas,Nev.(2/8/90)	Speech	1500.
Amer.Meat Institute, Naples,Fla.(3/17/90)	Speech	1000.
Milk Industry Foundation & Intern. Ice Cream Assoc. West Palm Beach, Fla. (2/26/90)	Panel	2000.
Nat. Cattlemen's Assoc.,Nashville,Tenn.(2/26/90)	Speech	1000.
Nat. Assoc. for Biomedical Research,Wash.,D.C.(1/30)	Speech	1000.
Dow Chemical U.S.A.,Wash., D.C. (2/7/90)	Speech	500.
United Fresh Fruit & Veg. Assoc.,San Antonio(2/11)	Speech	2000.
World Perspectives, Inc., Wash., D.C. (2/26/90)	Speech	2000.
Nat. Oilseeds Processors,San Diego,Cal.(3/1/90)	Speech	1000.
Arkansas Poultry Fed., Fayetteville, Ark. (2/23/90)	Panel	2000.
Grocery Manufacturers of America, Wash., D.C.(2/26)	Speech	2000.
Mid-America Dairymen, Wash., D.C. (4/6/90)	Speech	2000.
Nat. Grain & Feed Assoc., Williamsburg, Va.(4/12)	Speech	1000.
The Farm Credit Council, Wash.,D.C. (3/27/90)	Speech	1000.
Prof. Lawn Care Assoc. of America, Wash.,D.C.(4/13)	Speech	1000.
Harvest States Coops, Wash., D. C. (4/3/90)	Speech	1000.
U. S. Canola Assoc., Wash., D. C. (4/2/90)	Speech	1000.
Rockwell Intern., San Bernadino, Calif.(4/18/90)	Speech	2000.
Kraft General Foods, Inc., Wash., D.C.(5/24/90)	Speech	1000.
Nat. Council of Farmer Cooperatives,Wash.D.C.(6/7)	Speech	1000.

Attachment - 2

Tobacco Institute, Wash., D.C. (7/12/90)	Speech	2000.
Tex. Electric Cooperatives, Corpus Christi,Tx.(9/10)	Speech	1000.
IndustryTaskForceII on 2,4-D Research Data,Wash.D.C.	Speech	1000.
The Farm Credit Council,Orlando, Fla. (10/3/90)	Speech	1000.
Pesticides Strategic Planning for 90's (12/19/90)	Speech	1000.
Nat. Milk Producers Fed., San Diego,Cal. (12/11/90)	Speech	2000.

TOTAL $46,250.

DISPOSITION OF EXCESS HONORARIUM

Abilene Shrine Circus	$ 100.
West Tex. Rehabilitation Center	1850.
Museum of Abilene	500.
Abilene Police Officers	100.
Knights of Pythias, Abilene	160.
James Avery Memorial, Big Spring	250.
Abilene State Council	500.
Bethel Lutheran Church, Ericksdahl	2550.
Lutheran Social Services	100.
Ranching Heritage	100.
National FFA Foundation	100.
Tarleton Alumni	500.
Texas Tech Ex-Students	500.
Texas Tech Univ. Foundation	500.
National Exchange-Stamford	100.
International Foundation	1000.
Texas FFA	500.
Stamford Preservation League	1000.
Christian Exodus Program	113.
Danny Thompson Leukemia Fund	1000.
Stamford United Way	500.

Attachment -- 3

Ducks Unlimited	200.
Stamford Memorial Hospital	100.
Easter Seal	100.
First Baptist Church, Jacksboro	100.
Mental Health Assoc.	200.
Military Ministry	100.
Ballinger Jr. High School	500.
Salvation Army, Big Spring	500.
John McGoughey Memorial	1000.
University Christian Church	150.
The Falls Church	2250.
National Prayer Breakfast	250.
Post Care	250.
Parker County Crime Commission	250.
Texas Lions Club	500.
Ben Richey Boys Ranch	1000.
TOTAL	$19,473.

Attachment - 4

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

Calif. Cattlemen's Assoc.	11/27-28//89	Air travel-Wash.D.C. to Anaheim, Cal. w/stop in > Nashville on return(cost shared w/Nat. Milk Producers);1 night lodging & food
Nat. Milk Producers Fed.	11/28-29/89	Shared air travel w/above; > Nashville speech; 1 night > lodging & food
Monsanto Company	11/30-12/1/89	Air travel - Wash. to St. Louis to Lubbock, Tex.; 1 night lodging & food
Nat. Fertilizer Solutions Assoc.	12/6-12/7/89	Air travel-Wash. to Las Vegas & to Abilene, Tex.; 1 night > lodging & food (spouse also)
Ciba-Geigy Corp.	1/3/90	Round-trip air travel-Wash.to Greensboro,N.C.; 1 meal
Jack Africk Charity Pro Am	1/5-7/90	Air travel-Wash. to Boca Rotan, Fla.; food & lodging for 2 1/2 days; (spouse also-spouse had round-trip air travel)
Nat. Turkey Federation	1/7-8/90	Air travel- Boca Rotan to San Diego; 1 night lodging & food
Nat. Assoc. of Wheat Growers	1/11-12/90	Air travel- Lubbock to San Antonio to Abilene; 1 night lodging & food
Amer. Beekeeping Federation	1/14-15/90	Air travel- Abilene to Las > Vegas to Springfield, Mo.; 1 night lodging & food
Amer. Meat Institute	1/18-19/90	Air travel-from Washington to Fort Meyers, Fla.; 1 night > lodging & food
Milk Industry Foundation & Intern. Ice Cream Assoc.	1/19-20/90	Air travel- from Naples, Fla. to West Palm Beach & back to > Wash.; 1 night lodging & food
National Cattlemen's Assoc.	1/29/90	Round-trip air travel-from > Wash. to Nashville; food
United Fresh Fruit & Veg.Assoc.	2/10-11/90	Round-trip air travel- from Wash. to San Antonio; 1 night lodging & food (spouse also)
Nat. Soybean Processors	2/8/90	Round-trip air travel-from > Dallas to San Diego & back to Abilene; food
Arkansas Poultry Federation	2/22-23/90	Private plane-Wash. to Fayette-

		ville; commercial plane to > Abilene; 1 night lodging & food
Cong. Charity Tennis Tournament	3/2-4/90	Round-trip by bus-Wash. to > Greenbrier, W. Va.;2 nights lodging & food (spouse also) >
Mid-America Dairymen	3/19/90	Round-trip air travel-Wash. to St.Louis; food
Nat. Grain & Feed Assoc.	3/26/90	Round-trip air travel-Wash. to Williamsburg; food
Western States Meat Assoc.	3/29/90	Round-trip air travel- from > Wash.to San Diego;lodging&food
Harbor Town Cup Pro-Am (charity tennis)	4/7-10/90	Round-trip air travel - Wash. to Hilton Head, S. C.; 3 nights lodging & food (spouse also)
S. W. Bell Corp. (charity golf)	5/14/90	Round-trip air travel-Wash. to Fort Worth; food
Nat. Pork Producers Council	6/2-3/90	Air travel from Abilene to Des Moines to Wash.; 1 night > lodging & food
Holstein Association	6/25-26/90	Round trip air travel-Wash. > to Charleston, S. C.; 1 night lodging & food
Poultry Science Assoc., Inc.	8/6/90	Round trip via private plane-Wash. to Blacksburg, Va.
Texas Electric Cooperatives,Inc	8/7/90	Round-trip air travel- from > Wash.to Corpus Christi; food
Danny Thompson Memorial Golf T.	8/24-27/90	Round-trip air travel- Wash. > to Sun Valley; 4 nights lodging & food (spouse also)
Farm Credit System	9/23-24/90	Air travel from Abilene to > Orlando to Wash.; 1 night > lodging & meals (spouse also)
Nat. Ag. Chemicals Assoc.	9/28-30/90	Round-trip air - Wash. to > Greenbrier, W. Va.;2 nights > lodging & food (spouse also)
Cong. Charity Golf Tournament	11/9-11/90	Round-trip bus trip-Wash. to Greenbrier, W. Va.;2 nights > lodging & food (spouse also)
Chinese National Assoc. of Industry and Commerce	11/14-19/90	Round-trip air travel-Wash. to Taipei, Taiwan; 7 nights lodging & food (spouse also)
Nat. Milk Producers Federation	11/27-29/90	Round-trip air travel-Wash. to San Diego; 2 nights lodging & food (spouse also)

Attachment - 6

Texas Hotel & Motel Assoc.	12/7/90	Round-trip air travel- Wash. to Dallas; food (spouse also)

CHARLES W. STENHOLM
17TH DISTRICT
TEXAS

COMMITTEES
AGRICULTURE
VETERANS AFFAIRS

CHAIRMAN OF
SUBCOMMITTEE ON LIVESTOCK
DAIRY AND POULTRY

Congress of the United States
House of Representatives
Washington, DC 20515

Please Respond to
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WASHINGTON, D.C. 20515
(202) 225-6605

☐ DISTRICT OFFICES
P.O. BOX 1237
STAMFORD, TX 79553
(915) 773-3623

☐ P.O. BOX 1101
ABILENE, TX 79604
(915) 673-7221

May 31, 1991

(2)

MC

HAND DELIVERED

1991 MAY 31 PM 3:02

The Honorable Louis Stokes
Chairman
Comm.-Standards of Off.Conduct
U. S. House of Representatives
HT2 The Capitol
Washington, D.C. 20515

Dear Lou:

Per your request for additional information on my Financial Disclosure statement for 1990, I am pleased to provide the following:

PART I. EARNED INCOME, INCLUDING HONORARIA

Mid-America Dairymen, St. Louis, Mo., (4/6/90), Speech, $2000. (typographical error on original copy - speech in St. Louis, not Washington, D. C.)

Industry Task Force II on 2,4-D Research Data, Washington, D.C., (12/19/90), Speech, $1000.

PART II. ASSETS

RE: Number of acres of land in Jones County. There has been no change in total acreage owned. On 1989 Financial Disclosure, I noted a total of 880.5 acres. On 1990 Financial Disclosure, I listed 840 acares plus 40.5 acres under S & S Enterprises.

RE: Assets of Stenholm Trusts - Dessa Carmen Watson Estate for Cynthia Ann Stenholm (spouse) and Courtney Ann Stenholm (daughter).

Cynthia Ann Stenholm Trust (spouse)

Fixed common trust funds, NCNB, Abilene	Category D
Equity common trust funds, NCNB, Abilene	B
Money market funds, NCNB,Abilene	A
1/2 interest rent house-Dumas, Texas	B
1/4 interest Lot 27, Block 1, Stamford,Tex.	A
1/6 interest Vaugnn & Jett Survey,Taylor County,Tx	E
Mineral assets, Wheeler Cty, Tex.	E

Courtney Ann Stenholm Trust (daughter)

Fixed common trust funds, NCNB, Abilene	B
Income stock fund, NCNB, Abilene	B
Money market funds, NCNB, Abilene	A
Mineral assets, Wheeler County, Tex.	D

Oklahoma Oil & Gas Limited Partnership	B
Oklahoma Oil & Gas Limited Partnership(spouse)	B

(additional information provided)

PART IV. TRANSACTIONS

RE: Additional information on Co-Op stocks: There has been no change in membership/participation in any of the coops listed in my 1989 Financial Disclosure. More detailed information as follows:

Ericksdahl Coop Gin	Stock	A
Jones-Haskell Grain Coop	Stock	A
Stamford Electric Coop	Stock	A
Plains Cotton Coop	Stock	A
Rolling Plains Coop Compress	Stock	A

I appreciate having this opportunity to provide clarifying information on my 1990 Financial Disclosure. With good wishes, I remain

Sincerely yours,

Charlie

Charles W. Stenholm
Member of Congress

CWS:la

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 2:33

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

LOUIS STOKES
(Full Name)

2365 RAYBURN HOUSE OFFICE BLDG.
(Mailing Address)

WASHINGTON, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: OHIO District: 21st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D.C. (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	University of Baltimore Education Foundation, Inc Baltimore, Md. (Rec'd Jan. 5, 1990) (Speech was given in 1989)	Speech	$1,800	
	Cleveland Academy of Consulting Psychologists, Cleveland, Ohio (Rec'd Jan. 11, 1990) (Speech was given in 1989)	Speech	$1,000	
	American Hospital Association, Wash., D. C. (Jan. 18, 1990)	Speech	$1,500	
	Greater Cleveland Growth Association, Cleveland, Ohio (Jan. 18, 1990)	Speech	$1,000	

For additional earned income, use next page

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Reporting Individual's Name

LOUIS STOKES

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Dickinson School of Law, Carlisle, Pennsylvania (Received Jan. 19 1990) (Speech was given in 1989)	Speech	$1,500	
National Council of Educational Opportunity Associations, Inc., Wash., D. C. (March 9, 1990)	Speech	$2,000	
American Lung Association, Washington, D. C. (Paid by the Health and Medicine Counsel of Washington, D. C.) (March 12, 1990)	Speech	$1,000	
University of Illinois at Chicago, Chicago, Ill. (Received March 12, 1990) (Speech was given in 1989)	Speech	$1,500	
Society for Hospital Social Work Directors, Boston, Mass. (March 12, 1990)(Paid by the Amer. Hosp. Assn PAC of the)	Speech	$1,500	
American College of Obstetricians/Gynecologists, Washington, D. C. (March 26, 1990)	Speech	$1,000	
The Greater Southeast Management Co., Wash.,D.C. (June 12, 1990)	Speech	$1,000	
National Association of Hospitals, Denver, Colorado, (June 26, 1990)	Speech	$1,500	
Affinity Baptist Church, Cleveland, Ohio (Aug. 2, 1990)	Speech	$ 200	

Reporting Individual's Name

LOUIS STOKES

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Ohio Bell, Cleveland, Ohio (Sept. 7, 1990)	Speech	$1,000	
Ohio Chapter of Council School Alumni, Cleveland, Ohio (Oct. 2, 1990)	Speech	$ 100	
Mid-America of Educational Opportunity Program Personnel, The Abbey, Chicago, Ill. (Nov. 11, 1990)	Speech	$2,000	
Knoxville Area Urban League, Inc., Knoxville, Tenn. (Nov. 27, 1990)	Speech	$2,000	
American Lung Association Board of Directors, Orlando, Fla. (Paid by the Health & Medicine Counsel of Washington, D. C.) (Nov. 30, 1990)	Speech	$2,000	
Wooster College, Wooster, Ohio (Dec. 6, 1990)	Speech/Lecture	$2,000	X $900
National Council of Educational Opportunities Association Board of Directors, San Diego, Calif. (Dec. 16, 1990)	Speech	$2,000	X $850
Frank Loris Peterson Society of Adventist Men, Columbus, Ohio (Paid by Dr. Frank Hale, Jr.) (December 18, 1990)	Speech	$1,000	

Reporting Individual's Name
LOUIS STOKES

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X							X
			George Wash. Credit Union Accounts			X									X								X					
			182 Main Street, Dover, Delaware				X							X								X						
	Wright-Patman Congressional Credit Union Accounts			X											X						X							
	Citizens Bank of Maryland			X											X					X								
	Dominion Bank shares Mortgage Corp. (Escrow)				X										X					X								
	The Prudential Life Ins. Co.				NA								X								X							
	Northwest National Life Ins. Co.				NA								X								X							

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
LOUIS STOKES

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	The Prudential-Keough/Annuity				X						Not Ascertainable							Not Ascertainable									
	3611 Chelton Road, Shaker Heights,				X							X										X					
	Ohio																										

Reporting Individual's Name

LOUIS STOKES

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Leader Mortgage Co., Cleveland, Ohio	Mortgage on 3611 Chelton Road, Shaker Heights, Ohio		X					

Reporting Individual's Name: LOUIS STOKES

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	
San Diego Black Forum	Dec.8-11 1989	Airline Travel from San Diego to Cleveland to Wash.,DC	
		3 days food and lodging (Rec'd reimb. check on Jan. 31, 1990)	
University of Illinois	Dec. 7, 1989	Airline travel - Wash., D. C.-Chicago, Ill.-San Diego,	
		Calif., 1/2 day (Received reimbursement check on	
		March 12, 1990)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

PART VII (Continuation Sheet)

LOUIS STOKES

SOURCE	DATE	DESCRIPTION
Society for Hospital Social Work Directors (Paid by the American Hospital Association)	Mar. 26-27, 1990	Roundtrip Air Travel from Wash-Boston, 1 day, food and lodging
Mid-America of Educational Opportunity Program Personnel	Nov. 11-12, 1990	Roundtrip Air Travel from Cleveland-Chicago, 1 day, food and lodging
Knoxville Area Urban League, Inc.	Nov. 27-28, 1990	Roundtrip Air Travel from Wash-Knoxville, Tenn., 1 day, food and lodging
American Lung Association	Nov. 30-Dec. 2, 1990	Air Travel from Wash., D. C.-Orlando, Fla.-Columbus, Ohio, 1 1/2 days, food and lodging
Frank Loris Peterson Society of Adventist Men (Paid by Dr. Frank Hale, Jr.)	Dec. 3, 1990	Air Travel from Columbus, Ohio - Wash., D. C., 1 day, food and lodging
Wooster College	Dec. 5-8, 1990	Roundtrip Air Travel from Wash., D. C.-Cleveland, Ohio, 3 days, food and mileage
National Council of Educational Opportunities Association	Dec. 14-16, 1990	Roundtrip Air Travel from Wash.,DC-San Diego, Calif., 2 days, food and lodging

Reporting Individual's Name

LOUIS STOKES

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
TRUSTEE	The Martin Luther King, Jr, Center for Social Change
BOARD MEMBER	Congressional Black Caucus Foundation

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C app 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:43

U.S. [illegible]

HAND DELIVERED.

Gerry Eastman Studds
(Full Name)

237 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U S House of Representatives — State MA District 10	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6 000	
	Fairfax County Board of Education	Spouse Salary	NA	
	University of Colorado (Feb. 17, 1990)	Speech	$300	

For additional earned income, use next page

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Reporting Individual's Name
Gerry Eastman Studds

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
		1601 18th St., N.W., #312, Wash, DC				X							X										X					
		Exxon Stock			X														X									X
		GTE Stock		X															X									X
		Lorillard Bonds		X										X					X									X
		Computer Automation Stock		X															X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Gerry Eastman Studds

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC) (Please see attached statement about securities on this page.)		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	U.S. Treasury Bonds		X															X									
	Bristol Meyers Stock		X															X									X
	W.R. Grace Stock		X															X									
	G.M. Stock		X															X									
	IBM Stock		X															X									
	Rugers Corporation Stock		X															X									
	Houghton Mifflin Stock		X															X									
	Central Maine Power Stock		X															X									
	Dow Chemical Stock		X															X									X
	Eastman Kodak		X															X									X
	Foote, Cone, & Belding Stock		X															X									X
	Johnson Controls Stock		X															X									X
	First Australia Prime Income Fund		X															X									

House of Representatives
Washington, D.C. 20515

MEMORANDUM

NB - All the securities on this page are in an irrevocable trust, established by my brother, my sister, and me for our mother, Beatrice Studds, with my brother as trustee. All income from these securities goes to our mother for as long as she shall live. My brother, my sister, and I each own one-third of the securities -- and they will revert to us upon the dissolution of the trust at our mother's death. The securities listed represent my one-third interest in the trust.

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

Gerry Eastman Studds

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none for less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none for less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Fidelity Cash Reserves - IRA			X									X								X						X
	Fidelity Cash Reserves - SEP		X										X						X								X

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Reporting Individual's Name: Gerry Eastman Studds

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Exxon Common Stock		X		12/26/90		X					
	GTE - Common Stock		X		" " "	X						
	Lorillard Bonds		X		" " "	X						
	Eastman Kodak Stock (Beatrice Studds Trust)		X		02/6/90	X						
	Foote, Cune & Belding Stock (Beatrice Studds Trust)		X		04/26/90 & 06/21/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Greentree Mortgage Corporation	Mortgage on Rental Property		X					
	American Security Bank	Personal Loan		X					

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Reporting Individual's Name: Gerry Eastman Studds

PART IV—TRANSACTIONS (continued)

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Johnson Controls Stock (Beatrice Studds Trust)		X		04/26/90	X						
	Bristol Meyers Stock (Beatrice Studds Trust)	X			04/26/90	X						
	Dow Chemical Stock (Beatrice Studds Trust)	X			07/24/90	X						
	IRA & SEP: Fidelity Growth & Income ——→ Cash Reserves	X	X		05/14/90	X						
	Fidelity Growth Company → Cash Reserves	X	X		05/14/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name: Gerry Eastman Studds

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Human Rights Campaign Fund	May 19-20	Roundtrip Air from Wash, DC to Atlanta, 1 night spch & lodging	
University of Colorado	Feb 16-19	Roundtrip Air from Wash, DC to Denver, 2 nights lodging & speech	
Human Rights Campaign Fund	Nov 20-21	Roundtrip Air from Wash, DC to NYC, 1 night lodging & speech	
Human Rights Campaign Fund	Dec 1-2	Roundtrip Air from Wash, DC to Detroit, 1 night lodging & Speech	
ACLU	Nov 9-10	Air Travel P-town - Minneapolis - Wash, DC, 1 night & speech	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Gerry Eastman Studds

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Directors	Cape & Islands Self-Reliance Corporation
Board of Directors	Cape Cod Symphony Orchestra
Board of Directors	Massachusetts Centers for Excellence

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) 5/5/91

GPO 1991 37-598 (m)

Reporting Individual's Name
Gerry Eastman Studds

PART VIII—POSITIONS (continued)

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Directors	The Stop AIDS Project, Inc., Boston, MA
Honorary Board of Directors	Massachusetts Vietnam Veterans Memorial Fund

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5/15/91

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Bob Stump
(Full Name)

211 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Arizona District	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Stump Farms	Farm Income	$40,000***	
	***This is an estimate. I have an extension, and have not yet filed my income taxes for 1990.			

For additional earned income, use next page

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Reporting Individual's Name

Bob Stump

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional) See instructions, page 14

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock		X								X								X								X
		George Wash Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
	Stump Farms (see Part I)					X													X									
	Beneficial Interest in Jesse P. Stump Trust. Trust owns: Real Property in Maricopa County, Arizona							X											X									
	Valley Nat'l Bank/Phoenix,AZ			X										X							X							
	CDs: Patman Federal Credit Union/Wash, D.C.				X									X						X								
	Valley National Bank/ Phoenix, AZ				X									X						X								

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Bob Stump

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																										
CDs: Farmers & Merchants Bank/ Buckeye, AZ			X									X					X									X
Savings Account: Valley Nat'l Bank/Phx, AZ	X											X					X									
Stock: Desert Sun Bank/ Parker, AZ		X								X							X									
Farmers & Merchants Bank/ Buckeye, AZ	X									X							X									X
American Airlines			X							X							X									
Tenneco		X								X								X								
Delta Airlines		X								X							X									
Federal Resources	X									X							X									
T. G. Shaw Properties		X								X								X								
South Mountain Gin			X							X									X							
Life Ins: Union Bankers Ins.		X										X						X								
IRA: Prudential Bache		X								X		X					X									
~~Seligman Commun & Info Fund~~		X								X							X									
America West Airlines		X								X							X									
~~Northgate Exploration~~	X									X							X									
Lincoln American S&L CD		X										X					X									
~~Money Mart Assets~~	X											X					X									

Reporting Individual's Name

Bob Stump

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	CD: Farmers & Merchants Bank		X		10-88		X					
	Stock: Farmers & Merchants Bank	loss			6-90	XX						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name
Bob Stump

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20–22

NONE [X]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
Bob Stump

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Stump Farms (1/1/90 - 7/18/90)
Proprietor	Stump Farms (7/19/90 - 12/31/90)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C. app. 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
BS	5-16-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

DON SUNDQUIST
(Full Name)

230 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	XX Member of the U.S. House of Representatives	State: Tennessee District: 7th	☐ Officer or Employee — Employing Office
Report Type	XX Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

HAND DELIVERED

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash. D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	G.S. America (5/25 + 9/21/90)	Director's Fee	$1000	X
	Smokeless Tobacco Council (1/8/90)	Speech	$2000	
	U.S. Tobacco (2/5/90)	"	"	
	Mass Mutual (3/5/90)	"	"	
	Tobacco Institute	"	"	
	Phillip Morris (3/22/90)	"	"	
(4/3/90)	CART (Coalition Against Regressive Tax)	"	"	
	National Restaurant Assn. (5/21/90)	"	$1000	X ($750)
	Conwood (5/21/90)	"	"	
	Methodist Health (6/6/90)	"	$2000	

For additional earned income, use next page

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Reporting Individual's Name
DON SUNDQUIST

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
DISCUS (7/16/90)	Speech	$ 2000	
NATD (8/4/90)	"	"	
Nevada Resort Assn. (8/31/90)	"	"	
Hecht, Spencer & Associates (10/29/90)	"	$ 1000	
RJR Nabisco (12/5/90)	"	$ 2000	
Board of Trade/Chicago Merc. (12/11/90)	"	$ 1500	
Conwood (12/30/90)	"	$ 1000	
Phoenix Mutual (12/5/90)	"	$ 2000	X

Reporting Individual's Name
DON SUNDQUIST

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Wright Patman Credit Union	X											X					X									
JT	Community Bank of Germantown					X					X										X						
S	Red, Hot 'n Blue			X							X											X					
JT	G S America				X						X										X						
	Partner/Suntuc (Woodale Condo. Memphis, TN)			X								X						X									
JT	Community Bank of Germantown		X										X					X									

For additional assets and unearned income, use next page

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Reporting Individual's Name
DON SUNDQUIST

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	IRA		X								X							X									
	IRA		X								X								X								
	G.S. America PS58	X															Insurance		X								

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Reporting Individual's Name

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Metro Federal S&L, Nashville, TN	4886 Winchester Mortgage on Woodale Condo, Mem.		X					
	GS America (formerly Graphic Sales)	note payable to GS America for purchase of insurance policy		X					

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Reporting Individual's Name
DON SUNDQUIST

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [XX]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor if the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20–22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
see addendum				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions. Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
American Business in Thailand	1/7-12	fact-finding tour and meeting in Bangkok; 3 days food and lodging; self and spouse.	
Australian Meat &Livestock Corp	1/13-20	round-trip air travel from Memphis to Bangkok to Australia; 7 days food, lodging; self and spouse	
U.S. Tobacco	2/2-4	round-trip air to Fla. for self & spouse; 2 days meals and lodging.	
Mass Mutual	2/15/90	round-trip air to Florida; meal	
Nat'l Restaurant Assn.	5/17-20	round-trip air to Chicago; 2 days lodging, meals, self and spouse	
Schering-Plough Corporation	5/24-6/2	Fact-finding travel from Washington to Ireland; 7 days food, lodging; self and spouse.	
Campbell-Raupe	7/5-8	round-trip air to Massachusetts; 3 days lodging & meals; self & spouse.	
Nevada Resort Assn.	8/4-7	round-trip air to Nevada; 3 days lodging & meals; self and spouse.	
Ripon Educational Fund	11/10-17	round-trip air to Prague and Vienna; 6 days food & lodging for Eighth Transatlantic Conf.;self & spouse	
Board of Trade/Chicago Merc.	12/5/90	round-trip air to Chicago	
Phoenix Mutual	12/10/90	round-trip air to Connecticut; meal & overnight.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

ADDENDUM -- Don Sundquist

Reporting Individual's Name
DON SUNDQUIST

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Governors	Fund for American Studies
Executive Committee	G.S. America (formerly Graphic Sales of America, Inc.)
Alumni Board	Augustana College

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE XX

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No XX NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No XX NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, Officers, and Employees

DON SUNDQUIST
(Full Name)

230 Cannon HOB
(Mailing Address)

Washington, D.C. 20515

HAND DELIVERED

HAND DELIVERED

Filer Status	XX Member of the U.S. House of Representatives	State: Tennessee District: 7th	Officer or Employee	Employing Office
Report Type	XX Annual (May 15)	Amendment	Termination	Termination Date

MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	G.S. America (5/25 + 9/21/90)	Director's Fee	$1000	X
	Smokeless Tobacco Council (1/8/90)	Speech	$2000	
	U.S. Tobacco (2/5/90)	"	"	
	Mass Mutual (3/5/90)	"	"	
	Tobacco Institute (3/6/90)	"	"	
	Phillip Morris (3/22/90)	"	"	
(4/3/90)	CART (Coalition Against Regressive Tax)	"	"	
	National Restaurant Assn. (5/21/90)	"	$1000	X ($750)
	Conwood (5/21/90)	"	"	
	Methodist Health (6/6/90)	"	$2000	

For additional earned income, use next page

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Reporting Individual's Name
DON SUNDQUIST

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
DISCUS (7/16/90)	Speech	$ 2000	
NATD (8/4/90)	"	"	
Nevada Resort Assn. (8/31/90)	"	"	
Hecht, Spencer & Associates (10/29/90)	"	$ 1000	
RJR Nabisco (12/5/90)	"	$ 2000	
Board of Trade/Chicago Merc. (12/11/90)	"	$ 1500	
Conwood (12/30/90)	"	$ 1000	
Phoenix Mutual (12/5/90)	"	$ 2000	X

Reporting Individual's Name
DON SUNDQUIST

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
JT	Wright Patman Credit Union			X										X					X									
JT	Community Bank of Germantown						X					X									X							
S	Red, Hot 'n Blue				X							X											X					
JT	G S America					X						X									X							
	Partner/Suntuc (Woodale Condo. Memphis, TN)				X								X						X									
JT	Community Bank of Germantown			X										X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: DON SUNDQUIST

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	IRA (J.C. Bradford)		X								X							X									
	IRA (J.C. Bradford)		X								X								X								
	G.S. America PS58	X															Insurance		X								

Reporting Individual's Name

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Metro Federal S&L, Nashville, TN	4886 Winchester Mortgage on Woodale Condo, Mem.		X					
	GS America (formerly Graphic Sales)	note payable to GS America for purchase of insurance policy		X					

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Reporting Individual's Name
DON SUNDQUIST

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE XX

Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
see addendum				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions. Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
American Business in Thailand	1/7-12	fact-finding tour and meeting in Bangkok; 3 days food and lodging; self and spouse.	
Australian Meat &Livestock Corp	1/13-20	round-trip air travel from Memphis to Bangkok to Australia; 7 days food, lodging; self and spouse	
U.S. Tobacco	2/2-4	round-trip air to Fla. for self & spouse; 2 days meals and lodging.	
Mass Mutual	2/15/90	round-trip air to Florida; meal	
Nat'l Restaurant Assn.	5/17-20	round-trip air to Chicago; 2 days lodging, meals, self and spouse	
Schering-Plough Corporation	5/24-6/2	Fact-finding travel from Washington to Ireland; 7 days food, lodging; self and spouse.	
Campbell-Raupe	7/5-8	round-trip air to Massachusetts; 3 days lodging & meals; self & spouse.	
Nevada Resort Assn.	8/4-7	round-trip air to Nevada; 3 days lodging & meals; self and spouse.	
Ripon Educational Fund	11/10-17	round-trip air to Prague and Vienna; 6 days food & lodging for Eighth Transatlantic Conf.;self & spouse	
Board of Trade/Chicago Merc.	12/5/90	round-trip air to Chicago	
Phoenix Mutual	12/10/90	round-trip air to Connecticut; meal & overnight.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

ADDENDUM -- Don Sundquist

Reporting Individual's Name
DON SUNDQUIST

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Board of Governors	Fund for American Studies
Executive Committee	G.S. America (formerly Graphic Sales of America, Inc.)
Alumni Board	Augustana College

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [XX]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) — Yes [ ] No [XX] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) — Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C. app. 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C. app 6, § 104 and 18 U.S C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month, Day, Year): May 15, 1991

GPO 1991 37 598

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:54
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

RICHARD NELSON SWETT
(Full Name)

19 DOW RD.
(Mailing Address)

BOW, NEW HAMPSHIRE 03304

Filer Status	[X] Member of the U.S. House of Representatives — State: NH District: 2ND	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	RONALD S. LAUDER FOUNDATION	SPOUSE CONSULTING INCOME		
	PROGRAM CORPORATION OF AMERICA (FIRST QTR 1990)	SPOUSE SPEECH HONORARIUM	$1,000	
	TOM LANTOS FOR CONGRESS COMMITTEE	SPOUSE CONSULTING INCOME		
	LANTOS CAMPAIGN CONSULTING	SPOUSE CONSULTING INCOME		

For additional earned income, use next page

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Reporting Individual's Name
RICHARD N. SWETT

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	MERRILL LYNCH CMA			X							X								X								
	MERRILL LYNCH IRA		X														NONE	X									
S	MERRILL LYNCH IRA		X														NONE	X									
JT	1ST NH BANK, CONCORD, NH	X											X							X							
JT	116 CENTRAL AVE, BURLINGAME, CA						X					X											X				
S	WELLS FARGO BANK CHECKING		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: RICHARD N. SWETT

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	50% INTEREST IN VERITAS GROUP INCORPORATED		X																							X

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Reporting Individual's Name
RICHARD N. SWETT

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	50% INTEREST IN VERITAS GROUP INCORPORATED			X	12-31-90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	GLENDALE FEDERAL SAVINGS & LOAN, CA.	MORTGAGE ON 116 CENTRAL AVE.			X				

Reporting Individual's Name
RICHARD N. SWETT

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
NA		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
NA			

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
RICHARD N. SWETT

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
PRESIDENT	VERITAS GROUP INCORPORATED - AFFILIATION TERMINATED 12-31-90

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
R. N. Swett	MAY 15, 1991

GPO 1991 37-598 (m)

4380

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:19
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Allan B. Swift
(Full Name)

1502 Longworth Home Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Washington District: 2	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) (9)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Statement Attached	Honorarium	$27750	
	Statement Attached	Honorarium	900	X

For additional earned income, use next page

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CONGRESSMAN AL SWIFT
HONORARIUM AND REIMBURSEMENTS 1990

JAN. 13	NAT. CABLE TV ASSN., LOS ANGELES, CA HONORARIUM - PANEL RT AIRFARE SEA/LAX	$ 1,500.00
JAN. 19	CBS RECORDS, NEW YORK, NY HONORARIUM - SPEECH	$ 1,000.00
JAN. 22	J.P. MORGAN, NEW YORK, NEW YORK HONORARIUM - SPEECH	$ 1,000.00
JAN. 24	PUBLIC AFFAIRS COUNCIL HONORARIUM - SPEECH	$ 1,000.00
JAN. 30	FERTILIZER INSTITUTE HONORARIUM - SPEECH	$ 2,000.00
FEB. 21	EDISON ELECTRIC INSTITUTE HONORARIUM - SPEECH	$ 250.00
MAR. 06	R. DUFFY WALL & ASSOC. HONORARIUM - SPEECH	$ 1,000.00
MAR. 29	JEFFERSON GROUP FEDERAL FORUM HONORARIUM - SPEECH	$ 1,000.00
APR. 01	NAT. ASSN. OF BROADCASTERS, ATLANTA, GA HONORARIUM - PANEL RT AIRFARE DCA/ATL - 2 NIGHTS LODGING	$ 2,000.00
APR. 27	HOME SHOPPING NETWORK HONORARIUM - SPEECH	$ 2,000.00
MAY 10	EDISON ELECTRIC INSTITUTE HONORARIUM - SPEECH	$ 1,000.00
MAY 24	PRESTON, GATES, ELLIS & ROUVELES, MEEDS / TCI HONORARIUM - SPEECH	$ 2,000.00
JUN. 15	RETSIE ENERGY CONFERENCE, SAN DIEGO, CA NO HONORARIUM - PANEL RT AIRFARE IAD/SAN & TWO NIGHTS LODGING FOR MOC & SPOUSE	
SEP. 11	GUNDLE LINING SYSTEMS HONORARIUM - SPEECH	$ 1,000.00
SEP. 12	AETNA CASUALTY & PROPERTY HONORARIUM - SPEECH	$ 500.00

CONGRESSMAN AL SWIFT
HONORARIUM & REIMBURSEMENTS - 1990

SEP. 18	UNITED VIDEO HONORARIUM - SPEECH	$ 1,000.00
SEP. 19	NAT. ASSN. OF METAL FINISHERS HONORARIUM - SPEECH	$ 1,000.00
SEP. 27	DISTILLED SPIRITS COUNCIL HONORARIUM - SPEECH	$ 2,000.00
NOV. 12	HAZARDOUS WASTE ACTION COALITION, ORLANDO, FL HONORARIUM - SPEECH AIRFARE FOR MOC & SPOUSE - SEA/ /DCA - 4 NIGHTS LODGING	$ 2,000.00
NOV. 27	BEER INSTITUTE HONORARIUM - SPEECH	$ 2,000.00
DEC. 04	HENRY CLAY SOCIETY HONORARIUM - SPEECH	$ 500.00
DEC. 05	BELLSOUTH HONORARIUM - SPEECH	$ 2,000.00
	SUBTOTAL OF HONORARIA:	$27,750.00

DONATED TO THE FOLLOWING:

United Way of Snohomish County	$ 300.00
United Way of Skagit County	$ 300.00
United Way of Whatcom County	$ 300.00
TOTAL DONATED:	$ 900.00
TOTAL HONORARIA RECEIVED:	$26,850.00

Reporting Individual's Name
Allan B. Swift

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
JT	New Economy Fund				X							X			X							X						
JT	Templeton Growth Fund				X							X			X						X							
S	Apple Federal Credit Union		X											X					X									
	Congressional Federal C.U.			X										X						X								
JT	First American Bank			X										X						X								
JT	Virginia State Transportation Bonds				X									X							X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Allan B. Swift

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Mony Annultant's Withholding Fund		X										X					X									
JT	Sovran Bank, N.A.		X										X					X									
JT	Parking Space, Alexandria, VA		X									X							X								
JT	Condo Apartment, Lacey, WA			X								X								X							
JT	Condo Apartment, Bellingham, WA			X								X									X						
	Money Purchase Pension Plans:																										
	Mony Securities Corp.		X								X			X					X								
	Mass Cash Management Trust-Prime		X								X								X								
	Mass Financial High Income Trust I		X								X								X								
	Profit Sharing Retirement Plans:																										
	Mony Securities Corp.		X								X			X						X							
	Mass Cash Management Trust-Prime		X								X								X								
	Mass Financial High Income Trust I		X								X								X								
	Individual Retirement Accounts:																										
	Templeton World Fund		X								X			X						X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Allan B. Swift

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Individual Retirement Accts.(Contd)																									
S	Templeton World Fund		X								X			X						X						
	Shearson Lehman		X								X			X							X					

Reporting Individual's Name

Allan B. Swift

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
JT	First Interstate Bank of Oregan, N.A.	Mortgage on Condo Apt, Bellingham, WA		X					
JT	Inland Mortgage Corporation	Mortgage on Condo Apt, Alexandria, VA		X					
JT	Americanc	Mortgage on Condo Apt, Alexandria, VA			X				
JT	First American Bank of Virginia	Line of Credit		X					
JT	Jeanette Allen	Mortgage on Condo Apt, Lacey, WA	X						

Reporting Individual's Name
Allan B. Swift

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

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NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Statement Attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name

Allan B. Swift

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

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SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
X	May 15, 1991

GPO 1991 37-598 (m)

AL SWIFT
2ND DISTRICT WASHINGTON

COMMITTEE ON
ENERGY AND COMMERCE

CHAIRMAN
SUBCOMMITTEE ON TRANSPORTATION AND
HAZARDOUS MATERIALS

SUBCOMMITTEE ON ENERGY AND POWER

COMMITTEE ON
HOUSE ADMINISTRATION

CHAIRMAN
SUBCOMMITTEE ON ELECTIONS

SUBCOMMITTEE ON ACCOUNTS

Congress of the United States
House of Representatives
Washington, DC 20515

1502 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON DC 20515
(202) 225-2605

DISTRICT OFFICES

308 FEDERAL BUILDING
BELLINGHAM, WA 98225
(206) 733-4500

201 FEDERAL BUILDING
EVERETT, WA 98201
(206) 252-3188

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(206) 452-3211

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1-800-562-1385

HAND DELIVERED

May 23, 1991

Honorable Donnald K. Anderson
Clerk
United States House of Representatives
Office of Records and Registration
1036 Longworth HOB
Washington, D.C. 20515

MC (1)

1991 MAY 24 PM 9:26
U.S. HOUSE OF REPRESENTATIVES

Dear Mr. Anderson:

I would like to make a couple of clarifications to Part II of my Financial Disclosure form for calendar year 1991.

1) The parking space listed is located in the Olympus Condominium at 6301 Stevenson Avenue in Alexandria, Virginia.

2) The condominium in Lacy, Washington is located at 3300 Carpenter Road.

3) The condominium in Bellingham is located at Spinnaker Reach, 444 South State Street.

4) The Shearson Lehman IRA is a money market daily dividend fund.

Thank you for your assistance.

Sincerely,

Al Swift
Member of Congress

AS/mh

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Michael Lynn Synar
(Full Name)

217 8th St., S.E.
(Mailing Address)

Washington, DC 20003

Filer Status	[x] Member of the U.S House of Representatives — State: OK District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Goldman Sachs & Co. (1-26-90)	Honorarium	$2000.	
	Competitive Telecommunications Association (2-22-90)	Honorarium	$2000.	
	BP America, Inc. (2-13-90)	Honorarium	$2000.	
	MCI (3-23-90)	Honorarium	$500.	
	Telecommunications Industry Assoc. (3-26-90)	"	$250.	
	American College of Obstreticians & Gynocologists (3-26-90)	"	$1000.	
	US Sprint (2-16-90)	"	$1000.	
	NRECA (2-14-90)	"	$1000.	
	Edison Electric (2-21-90)	"	$1000.	
	The Brookings Institution (3-15-90)	"	$ 400.	

For additional earned income, use next page

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Reporting Individual's Name

Michael L. Synar

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
James L. Casserly of Squire, Sanders & Dempsey (4-4-90)	Honorarium	$ 200.	
AT&T (3-30-90)	"	$ 600.	
Pfizer Inc. (4-6-90)	"	$1000.	
National Association of Broadcasters (4-16-90)	"	$2000.	
Chicago Research and Trading Group (5-4-90)	"	$2000.	
Chicago Mercantile Exchange (5-2-90)	"	$ 750.	
Chicago Board of Trade (5-3-90)	"	$ 750.	
The Connell Company (5-4-90)	"	$2000.	
The Wine Institute (5-16-90)	"	$1000.	
American Group Practice Association (5-14-90)	"	$1000.	
R. Duffy Wall & Associates (5-22-90)	"	$1000.	
Hotel Employees & Restaurant Employees Union (6-5-90)	"	$2000.	
Pfizer, Inc. (9-26-90)	"	$1000.	X
National Council of Farmer Cooperatives (10-29-90)	"	$1000.	X

Reporting Individual's Name

Michael L. Synar

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X							X								X								X
			George Wash Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X								X							
	Pioneer II Mutual Fund				X							X			X					X								
	Europacific Growth Fund (Mutual Fund)				X							X			X					X								
	HR 10 Retirement Plan (Keough)				X									X					X									
	River Place Coop #W734, Arlington, VA				X								X									X						
	River Place Coop #W638, Arlington, VA				X								X															X
	20 acres of unimproved residential property, Muskogee, OK				X							NONE																

For additional assets and unearned income, use next page

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Reporting Individual's Name
Michael L. Synar

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Livestock, Muskogee, OK			X								NONE															
	1/3 interest in 140 acres of unimproved agriculture, Muskogee, OK				X							NONE															
	Individual Retirement Account, Legg Mason, Baltimore, MD		X								X			X						X							
	Individual Retirement Account, AMCAP Fund, Capital Guardian, Brea, CA		X								X			X				X									

Reporting Individual's Name

Michael L. Synar

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	River Place Coop #W638, Arlington, VA		X		4-13-91	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Trustbank Savings, McLean, VA	Mortgage on River Place Coop #W638			X				
	Trustbank Savings, McLean, VA	Mortgage on River Place Coop #W734			X				
	Federal Land Bank, Broken Arrow, OK	Loan for 80 acres	X						
	Federal Land Bank, Broken Arrow, OK	Loan for 60 acres	X						

Reporting Individual's Name
Michael L. Syanr

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Goldman Sachs & Co. (speech)	1-18-90	Roundtrip air travel from Wash DC to NYC, one night lodging.	
COMPTEL Assoc. (speech)	Feb. 22-23 1990	Roundtrip air from Wash. DC to Miami Beach, one night lodging.	
NRECA (speech)	Feb. 3-5, 1990	Roundtrip air from Wash. DC to Orlando, two nights lodging.	
Pfizer, Inc. (speech)	3-15-90	Roundtrip air from Wash. DC to NYC.	
National Assoc. of Broadcasters (speech)	4-1-90	Roundtrip air from Wash. DC to Atlanta.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Michael L. Synar

Continuation of Part VII- Reimbursements

The Connell Co. (speech)	5-7-90	Roundtrip air from Wash. DC to New Jersey.
Western Rural Telephone Assoc. (speech)	April 10-16 1990	Air fare from Oklahoma City - Maui - DC, and 3 nights lodging. (extra days at members expense)
Dean Witter (speech)	12-13-90	Roundtrip air from Wash. DC to NYC, and ground transportation.
CBS (meeting with executives)	3-15-90	One night lodging in NYC.
Chicago Research Group (speech)	May 3-4 1990	Roundtrip air from Wash. DC to Chicago, and ground transportation.

Reporting Individual's Name
Michael L. Synar

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	Synar Land & Cattle Co., Muskogee, OK
Consultant	Eastern Oklahoma Land & Cattle Co., Muskogee, OK
Director	Clara Noe Foundation, Tulsa, OK

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Michael Synar	5-15-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Robert M. Tallon, Jr.
(Full Name)

432 Cannon Office Building
(Mailing Address)

Washington DC 20515

Filer Status	[X] Member of the U S House of Representatives	State: SC District: 6	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

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MG (Office Use Only) 11

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute (Jan. 8, 1990)	Speech-Honoraria	$ 2,000.	
	American Peanut Producers & Manufacturers, Inc. (Feb 16, 1990)	Speech-Honoraria	1,000.	
	Coffee, Sugar, & Cocoa Excl. (March 29, 1990)	Speech-Honoraria	1,000.	
	Smokeless Tobacco Council Inst. (May 15, 1990)	Speech-Honoraria	1,000.	
	Phillip Morris (May 18, 1990)	Speech-Honoraria	2,000.	
	U.S. Tobacco (May 23, 1990)	Speech-Honoraria	2,000.	
	The Cornell Company (June 1, 1990)	Speech-Honoraria	2,000.	
	Coffee, Sugar & Cocoa Exc. (September 20, 1990)	Speech-Honoraria	1,000.	
	Board of Trade - City of Chicago (Nov. 2, 1990)	Speech-Honoraria	750.	
	Chicago Mercantile Exchange (Nov. 2, 1990)	Speech-Honoraria	750.	

For additional earned income, use next page

Reporting Individual's Name

Robert M. Tallon Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Campground Owners (Nov. 29, 1990)	Speech-Honoraria	$ 1,000.	
National Ocean Ind. Assoc. (Nov. 28, 1990)	Speech-Honoraria	1,000.	
SCHNA Corp. (Dec. 20, 1990)	Speech-Honoraria	1,000.	
Fundacion Chile (Dec. 17, 1990)	Speech-Honoraria	2,000.	
Phillip Morris (Dec. 27, 1990)	Speech-Honoraria	1,000.	
Real Estate Commission	Spouse's Gross Income		

Reporting Individual's Name

Robert M. Tallon Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	Individual Retirement Account					X									X								X							
	Florence Building								X					X											X					
	N. Myrtle Beach Building							X						X											X					
	1517 N. Ocean Blvd.								X					X										X						
	Bear, Stearns, & Co.					X							X									X								
	Hambrecht & Quist						XX									X			(Capital Loss)	X										X

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert M. Tallon Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	SCN Discount Brokerage					X								X			(Capital Loss)	X									X
	Bear, Stearns & Co.													X			(Capital Loss)	X									X
S	Eastman Kodak Company	X									X							X									X
	Hambrecht & Quist										X									X							
	South Carolina National		X										X					X									
	Congressional Federal Credit Union	X											X					X									
	Tallon Sales Co., Inc. Common Stock					X																					

Reporting Individual's Name: Robert M. Tallon Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Hambrecht & Quist - See Attachment A		X		Various				X			
	SCN Discount Brokerage - See Attachment B		X		Various					X		
	Bear Stearns - See Attachment C		X		Various				X			
S	Eastman Kodak		X		3/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Security Mortgage Corp.	Mortgage on Florence Store Locations				X			
	Rebecca Putnam	Mortgage on 1517 N. Ocean Blvd.		X					
	Bear Sterns	Line of Credit		X					
	SCN Discount Brokerage	Line of Credit			X				
	Hambrecht & Quist	Line of Credit			X				

Reporting Individual's Name
Robert M. Tallon Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☑

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

See Attachment Part VII

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Listing Attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Robert M. Tallon, Jr.

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT"

Tobacco Institute January 17 - 21, 1990 - Roundtrip airfare from Florence, SC - Palm Springs, California, 4 days food and lodging, for self and spouse.

Coffee, Sugar & Cocoa Exchange March 9 - 12, 1990 - Roundtrip airfare for self (from DC) and spouse (from Florence, SC) to Boca Raton, Florida, 3 days food and lodging for both.

U.S. Tobacco Company March 25 - 28, 1990 - Roundtrip travel on corporate jet for self and spouse from DC - Louisville, KY, 3 days food and lodging.

Connell Rice and Sugar Company June 11, 1990 - Airfare from Florence to Newark, NJ to Washington and Lunch for self.

Coffee, Sugar, and Cocoa Exchange September 7, 1990 - Airfare from DC to New York to Florence for self, and lunch.

Chicago Mercantile Exchange November 7, 1990 - Airfare from Florence to Chicago DC for self, and lunch.

National Ocean Industries Association November 16 - 17, 1990. Roundtrip airfare from Florence to Charleston, and one day food and lodging, for self.

Fundacion Chile November 21 - 27, 1990 - Airfare from DC to Santiago, Chile to San Antonio, Texas, for self; Airfare from DC to Santiago, Chile to Columbia, South Carolina for child; and 5 nights food and lodging for both.

National Campground Owners Association November 28 - 29, 1990 - Airfare from San Antonio, Texas to Florence and one day food and lodging, for self.

Reporting Individual's Name

Robert M. Tallon Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	Tallon Sales Company, Inc.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S C app. 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robin Tallon	

GPO 1991 37-598 (m)

4406

Attachment A

TD. IN U.S

Hambrecht & Quest 1990 Trades

NAME Robin Tallon

ACCOUNT NO H 10 6050693

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	BOUGHT DATE	BOUGHT PRICE	BOUGHT NET COST	S/U	SOLD DATE	SOLD PRICE	SOLD NET PROCEEDS	S/U	PROFIT	LOSS
800	Cypress Semiconductor						03-29-90	B				
400	Collagen Corp						08-07-90	B				
600	3 COM						06-01-90	B				
5000	Trace						12-05-90	B				
400	U.T.S. Receptech Corp						01-19-90	B				
1000	Westwood One Inc.						09-10-90	B				
500	Care PluS Inc. Com						03-13-90	B				
1000	ADAC LABS						07-06-90	B				
400	Interated Sys. Inc.						03-23-90	B				
300	Suntellect Inc.						04-12-90	B				
400	Novellus Sys Inc.						05-03-90	B				
300	Aspect Telecomm.						06-18-90	B				
600	Seagate Tec						09-13-90	B				
200	Centocor Inc.						07-02-90	B				
100	U.S. Surgical						08-21-90	B				
300	First Fiancial Mang.						11-05-90	B				
150	Wells Fargo & Co.						11-16-90	B				

TD. IN U.S

S.C.N. Discount Brokerage

1990 Trades

NAME Robin Tallon

ACCOUNT NO. 38171186

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	BOUGHT DATE	BOUGHT PRICE	BOUGHT NET COST	S/U	SOLD DATE	SOLD PRICE	NET PROCEEDS	S/U	PROFIT	LOSS
6000	Adobe Systems						01-04-90	E				
3000	3 COM Corp.						06-13-90	C				
3000	3 COM Corp.						06-12-90	C				
3000	3 COM Corp.						06-21-90	C				
2000	Richardson Elec.						06-26-90	C				
1000	Zero Corp.						03-12-90	B				
1000	Information Res.						03-08-90	B				
2000	SHL Systemhouse						06-12-90	B				
1000	Interleaf						06-22-90	B				
1000	Immunex Corp.						05-03-90	C				
1000	IDB Communications						05-03-90	B				
1000	Westmark						08-07-90	C				
1000	Beckman						08-07-90	C				
3000	Cirris Logic						08-29-90	C				

Attachment B

4408

Bear Stearns 1990 Trades

NAME Robin Tallon

ACCOUNT NO. 820,09497-2-8

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	BOUGHT DATE	BOUGHT PRICE	BOUGHT NET COST	S/U	SOLD DATE	SOLD PRICE	SOLD NET PROCEEDS	S/U	PROFIT	LOSS
1000	K-Mart						3-14-90	C				
800	Aristech Chem Corp						1-17-90	C				
500	Union Carbide						2-22-90	B				
500	Millicom Inc.						3-06-90	B				
500	Control Data						3-30-90	B				
1000	Smithkline						5-11-90	C				
800	Chysler						4-27-90	B				
700	Phillip MOrris						6-05-90	C				

Attachment A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 JUL 23 12:45

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

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(Office Use Only)

Robert M. Tallon, Jr.
(Full Name)

432 Cannon Office Building
(Mailing Address)

Washington DC 20515

Filer Status	[X] Member of the U S House of Representatives	State: SC District: 6	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute (Jan. 8, 1990)	Speech-Honoraria	$ 2,000.	
	American Peanut Producers & Manufacturers, Inc. (Feb 16, 1990)	Speech-Honoraria	1,000.	
	Coffee, Sugar, & Cocoa Excl. (March 29, 1990)	Speech-Honoraria	1,000.	
	Smokeless Tobacco Council Inst. (May 15, 1990)	Speech-Honoraria	1,000.	
	Phillip Morris (May 18, 1990)	Speech-Honoraria	2,000.	
	U.S. Tobacco (May 23, 1990)	Speech-Honoraria	2,000.	
	The Cornell Company (June 1, 1990)	Speech-Honoraria	2,000.	
	Coffee, Sugar & Cocoa Exc. (September 20, 1990)	Speech-Honoraria	1,000.	
	Board of Trade - City of Chicago (Nov. 2, 1990)	Speech-Honoraria	750.	
	Chicago Mercantile Exchange (Nov. 2, 1990)	Speech-Honoraria	750.	

For additional earned income, use next page

4410

Reporting Individual's Name

Robert M. Tallon Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Campground Owners (Nov. 29, 1990)	Speech-Honoraria	$ 1,000.	
National Ocean Ind. Assoc. (Nov. 28, 1990)	Speech-Honoraria	1,000.	
SCHNA Corp. (Dec. 20, 1990)	Speech-Honoraria	1,000.	
Fundacion Chile (Dec. 17, 1990)	Speech-Honoraria	2,000.	
Phillip Morris (Dec. 27, 1990)	Speech-Honoraria	1,000.	
Real Estate Commission	Spouse's Gross Income	N/A	

Reporting Individual's Name

Robert M. Tallon, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	(non-discretionary - IRA) Security Federal, Florence, SC			X									X								X						
	Florence, SC Florence Bldg., 2180 W. Evans St.						X					X											X				
	2006 Highway 17 N. Myrtle Beach Bldg., NMB.,S.C.					X						X											X				
	1517 N. Ocean Blvd., NMB., S.C.						X					X										X					
	South Carolina National		X										X					X									
	Congressional Fed'l.Credit Union	X											X					X									

For additional assets and unearned income, use next page

4412

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert M. Tallon, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Tallon Sales Co.(Common Stock)					X														NONE						
S	Eastman Kodak Co.	X									X							X								X
	Whitman Corp. Stock			X															NONE							
	Tonka Corp. Stock		X																NONE							X
	Eastman Kodak Stock			X															NONE							X
	Anistech Chem. Corp Stock			X										X						X						X
	Union Carbide " "		X											X					X							X
	Millicom Inc. " "		X											X				X								X
	Control Data Corp. "		X											X					X							X
	Smithkline "			X										X					X							X
	Philip MOrris Inc. "			X										X					X							X
	FCOB Stock		X																	none						X
	ADAC "		X																	none						X

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert M. Tallon, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	First Interstate Stock		X																	NONE						X
	Quantum "		X																	NONE						X
	Science Med. Life Sys. Stock		X																	NONE						X
	Ouch "			X																NONE						X
	VITI			X																NONE						X
	Cypress Semiconductor Stock		X											X						X						X
	Collagen Corp. "			X										X				X								X
	3 COM "			X										X				X								X
	Trace			X										X						X						X
	U.T.S. Receptech Corp. "			X										X				X								X
	Care Plus Inc. "			X										X					X							X
	Interleaf Systems Inc. "		X											X						X						X
	Suntellect Inc. "			X										X					X							X
	Novellus Systems Inc. "			X										X						X						X
	WElls Fargo & Co. "			X										X					X							X

4414

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert M. Tallon, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	3 COM Corp			X										X								X					
	Zero Corp.		X											X						X							
	SHL Systemhouse		X											X						X							X
	Interleaf		X																	X							X
	Cirris Logic			X										X				X									X
	ADAC Labs			X															NONE								X
	T-MAX		X																NONE							X	
	C 3 COM			X															NONE							X	

Reporting Individual's Name

Robert M. Tallon Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Hambrecht & Quist - See Attachment A		X		Various				X			
	SCN Discount Brokerage - See Attachment B		X		Various					X		
	Bear Stearns - See Attachment C		X		Various				X			
S	Eastman Kodak		X		3/90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Security Mortgage Corp.	Mortgage on Florence Store Locations				X			
	Rebecca Putnam	Mortgage on 1517 N. Ocean Blvd.		X					
	Bear Sterns	Line of Credit		X					
	SCN Discount Brokerage	Line of Credit			X				
	Hambrecht & Quist	Line of Credit			X				

Reporting Individual's Name
Robert M. Tallon Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

See Attachment Part VII

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Listing Attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Robert M. Tallon Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Director	Tallon Sales Company, Inc.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robin Tallon	June 28 1991

Robert M. Tallon, Jr.

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT"

Tobacco Institute January 17 - 21, 1990 - Roundtrip airfare from Florence, SC - Palm Springs, California, 4 days food and lodging, for self and spouse.

Coffee, Sugar & Cocoa Exchange March 9 - 12, 1990 - Roundtrip airfare for self (from DC) and spouse (from Florence, SC) to Boca Raton, Florida, 3 days food and lodging for both.

U.S. Tobacco Company March 25 - 28, 1990 - Roundtrip travel on corporate jet for self and spouse from DC - Louisville, KY, 3 days food and lodging.

Connell Rice and Sugar Company June 11, 1990 - Airfare from Florence to Newark, NJ to Washington and Lunch for self.

Coffee, Sugar, and Cocoa Exchange September 7, 1990 - Airfare from DC to New York to Florence for self, and lunch.

Chicago Mercantile Exchange November 7, 1990 - Airfare from Florence to Chicago DC for self, and lunch.

National Ocean Industries Association November 16 - 17, 1990. Roundtrip airfare from Florence to Charleston, and one day food and lodging, for self.

Fundacion Chile November 21 - 27, 1990 - Airfare from DC to Santiago, Chile to San Antonio, Texas, for self; Airfare from DC to Santiago, Chile to Columbia, South Carolina for child; and 5 nights food and lodging for both.

National Campground Owners Association November 28 - 29, 1990 - Airfare from San Antonio, Texas to Florence and one day food and lodging, for self.

Hambrecht & Quest

1990 Trades

AME Robin Tallon

ACCOUNT NO.

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	* BOUGHT DATE	PRICE	NET COST	S/U	SOLD DATE	PRICE	NET PROCEEDS	S/U	PROFIT	LOSS
800	Cypress Semiconductor		1/4/90		B		03-29-90	B				
400	Collagen Corp						08-07-90	B				
600	3 COM						06-01-90	B				
5000	Trace						12-05-90	B				
400	U.T.S. Receptech Corp						01-19-90	B				
1000	Westwood One Inc.						09-10-90	B				
500	Care Plus Inc. Com		2/6/90		B		03-13-90	B				
1000	ADAC LABS		2/27/90		B		07-06-90	B				
400	Interated Sys. Inc.		3/6/90		B		03-23-90	B				
300	Suntellect Inc.		4/12/90		B		04-12-90	B				
400	Novellus Sys Inc.		4/12/90		B		05-03-90	B				
300	Aspect Telecomm.		5/1/90		B		06-18-90	B				
600	Seagate Tec		5/3/90		B		09-13-90	B				
200	Centocor Inc.		6/8/90		B		07-02-90	B				
100	U.S. Surgical		7/24/90		B		08-21-90	B				
300	First Fiancial Mang.		8/3/90		B		11-05-90	B				
150	Wells Fargo & Co.		10/24/90		B		11-16-90	B				
1000	FCOB		7/3/90		B							
4000	ADAC		2/27/90		B							
500	First Interstate		7/16/90		B							
300	Quantum		9/12/90		B							
200	Science Med. Life Sys		10/23/90		B							
700	Ouch		11/16/90		B							
600	VITI		12/5/90		B							

**If no buy dates are listed [illegible]

ATTACHMENT A

S.C.N. Discount Brokerage 1990 Trades

NAME Robin Tallon

ACCOUNT NO.

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	BOUGHT DATE	BOUGHT PRICE	BOUGHT NET COST	S/U	SOLD DATE	SOLD PRICE	NET PROCEEDS	S/U	PROFIT	LOSS
6000	Adobe Systems						01-04-90	E				
3000	3 COM Corp.						06-13-90	C				
3000	3 COM Corp.						06-12-90	C				
3000	3 COM Corp.		1/12/90		C		06-21-90	C				
2000	Richardson Elec.		6/26/90		C		06-26-90	C				
1000	Zero Corp.		1/16/89		C		03-12-90	B				
1000	Information Res.		1/16/90		B		03-08-90	B				
2000	SHL Systemhouse		1/18/90		B		06-12-90	B				
1000	Interleaf		1/24/90		B		06-22-90	B				
1000	Immunex Corp.		1/24/90		C		05-03-90	C				
1000	IDB Communications		1/25/90		B		05-03-90	B				
1000	Westmark		7/16/90		C		08-07-90	C				
1000	Beckman		7/16/90		C		08-07-90	C				
3000	Cirris Logic		8/7/90		C		08-29-90	C				
2100	ADAC Labs		1/11/90		C							
2000	T-MAX		2/1/90		B							
3000	3-COM		12/20/90		C							

If no buys are listed, the buys were prior to 1990

ATTACHMENT B

Bear Stearns 1990 Trades

NAME Robin Tallon

ACCOUNT NO.

SHARES	COMPANY (SYMBOL)	CASH OR MARGIN	BOUGHT DATE	BOUGHT PRICE	BOUGHT NET COST	S/U	SOLD DATE	SOLD PRICE	SOLD NET PROCEEDS	S/U	PROFIT	LOSS
1000	K-Mart						3-14-90	C				
800	Aristech Chem Corp						1-17-90	C				
500	Union Carbide		1/22/90		B		2-22-90	B				
500	Millicom Inc.		2/23/90		B		3-06-90	B				
500	Control Data		3/8/90		B		3-30-90	B				
1000	Smithkline		3/14/90		C		5-11-90	C				
800	Chysler		4/2/90		B		4-27-90	B				
700	Phillip MOrris		5/30/90		C		6-05-90	C				
1000	TOnka Corp.		4/27/90		B							
600	Eastman Kodak		6/14/90		C							

If no buy dates are listed, the buys were prior to 1990.

Attachment C

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 10 26
U.S. HOUSE OF REPRESENTATIVES
AND DELIVERED

John S. Tanner
(Full Name)

1232 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S House of Representatives	State Tennessee District 8	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Metropolitan Federal Savings and Loan Board of Advisors	Fee	$3,750.00	
	Union City Insurance Agency (Family Business)	Fee	$12,400.00	
	Tennessee National Guard	Salary	7,046.74	
	Fuller Partners Realty	Spouse Salary	3,427.88	

For additional earned income, use next page

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Reporting Individual's Name

John S. Tanner

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Dean Witter/Sears Liquid Asset		X								X							X									
	Union City Insurance Agency Stock			X																							
	Reelfoot Bank Savings Account		X										X					X									
	Metropolitan Federal Savings and Loan Accounts			X									X							X							
	Metropolitan Federal Savings and Loan Stock			X									NONE								NONE						
	Note Payable from Mr. Bob Hunt			X													From sale of HFIT				X						

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John S. Tanner

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Note Payable from Mr. Jim Pierce ~~on 1985 sale of land~~			x										NONE								NONE					
Sovran Bank Savings Account		x											X				X									XX

4425

Reporting Individual's Name
John S. Tanner

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Reelfoot Bank	Personal Note	XX						

Reporting Individual's Name: John S. Tanner

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE [XX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Chinese National Association of Industry and Commerce	Aug5-11 1990	Round trip airfare Washington,D.C.to Taiwan Food, Lodging for 5 days ~~(self and spouse)~~	
BP Exploration	Aug.13-14 1990	Roundtrip airfare Anchorage Alaska to Deadhorse Alaska, ~~and dinner.(Self and Spouse)~~	
Tennessee Trucking Association	Sept.21-24 1990	Roundtrip airfare Washington D.C. to Panama City,FLA ~~Food and lodging for three days (self and spouse)~~	
Opportunities, Inc.	Aug.29-30 1990	Air travel from Union City, Tennessee to Texarkana, Arkansas and overnight lodging and meals to participate in a charity event for Opportunities Inc.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4427

Reporting Individual's Name

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Member, Board of Advisors	Metropolitan Federal Savings and Loan (Resigned June, 1990)
Vice-President	Union City Insurance Agency (FAMILY BUSINESS).

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE XX

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No XX NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No XX NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 14, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 AM 9 48

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Wilbert Joseph "Billy" Tauzin, II
(Full Name)

2342 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: LA District: 3	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 12

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	US Telephone Association 1/31/90	Speech HON	$1,000	
	National Assn. of Broadcasters 2/12/90	Speech HON	2,000	
	LOOP, Inc. 2/12/90	Speech HON	2,000	
	Smokeless Tobacco Council, Inc. 3/12/90	Speech HON	1,000	
	US Tobacco Co. 3/14/90	Speech HON	2,000	
	American Advertising Federation 3/27/90	Speech HON	2,000	
	IPP/PUHCA Symposium 3/27/90	Speech HON	1,000	
	Interstate Natural Gas Assn. of American 4/2/90	Speech HON	2,000	
	Connell Rice & Sugar Co., Inc. 4/2/90	Speech HON	2,000	
	Goldman, Sachs & Co. 4/2/90	Speech HON	2,000	

For additional earned income, use next page

Reporting Individual's Name
Wilbert J. Tauzin, II

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Interstate Natural Gas Assn. of America 4/4/90	Speech HON	$2,000	
Securities Industry Assn., Inc. 4/5/90	Speech HON	2,000	
Kaiser Aluminum & Chemical Corp. 4/18/90	Speech HON	1,500	
Board of Trade of the City of Chicago 4/19/90	Speech HON	1,000	
Natl. Assn. of Broadcasters 4/24/90	Speech HON	2,000	
Home Shopping Club 5/3/90	Speech HON	2,000	Portion paid to charity $650
Centel 6/1/90	Speech HON	500	X
Natl. Cable TV Assn. 6/21/90	Speech HON	1,500	X
Secura Group 7/5/90	Speech HON	1,000	X
Natl. Assn. of Broadcasters 7/5/90	Speech HON	1,000	X
Diagnostic Retrievals Systems 7/5/90	Speech HON	2,000	X
The Federal Forum 7/19/90	Speech HON	1,000	X
Lamar Corp. for Corrective Legislation Assn./ Kevin Reilly Sr. 9/21/90	Speech HON	2,000	X
Western Coal Traffic League 10/16/90	Speech HON	2,000	X
Am. Iron & Steel Institute 11/1/90	Speech HON	2,000	X
Inst. of Scrap Recycling Ind., Inc. 11/1/90	Speech HON	1,000	X
Fairfax County Board of Education	Spouse's Salary	NA	

Reporting Individual's Name

Wilbert J. Tauzin, II

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	State Mutual Life Insurance Co.	X											X						X								
	Wright Patman Credit Union		X										X							X							
	Secor Bank IRA	X											X							X							
S	Secor Bank IRA	X											X					X									
	Putnam IRA High Yield Fund	X											X						X								
S	Putnam IRA High Yield Fund	X											X					X									

For additional assets and unearned income, use next page

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Wilbert J. Tauzin, II

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Bank Shares First Interstate Bank of S.LA		X								X								X								
	First Int. Bank of S. LA (IRA)		X										X					X									
S	First Int. Bank of S. LA (IRA)	X											X					X									
	St. Charles Royalle Subdivision																										
	Lots *(See attachment)					X											Note* paymts		X								Note payments on 2 lots
	"																1/3 ptnr. interest		X								Partnership Distribution
	"																lot sale					X					Sale of lot
	*Bond for Deed note payments on																										
	Lot 2C Block one & Lot 2B, Block one																										
	**Sale of Lot 12, Block 4																										

Reporting Individual's Name
Wilbert J. Tauzin, II

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	St. Charles Royalle Subdivision lot /Lafourche Parish, LA		X		11/90	X						
	Lot 12, Block 4											

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	No liabilities meet the reporting threshhold								

Reporting Individual's Name
Wilbert J. Tauzin, II

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
US Tobacco Conference	1/5-7/90	RT air DC/Palm Springs, CA;food & lodging; 2 days	
Connell Rice & Sugar Co.	3/30/90	RT air DC/Newark, NJ;dinner	
Goldman, Sachs	4/2-3/90	RT air DC/NYC;meals,lodging; 1 night	
Int. Natural Gas Assn. of Am.	4/6-8/90	RT air DC/Naples, FL;meals,lodging; 2 days	
Board of Trade;Chicago	3/8-10/90	RT air DC/Boca Raton, FL;meals,lodging;2 days;self/spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

continued

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Natl. Assn. of Broadcasters		3/31-4/2	RT Air DC/Atlanta;meals,lodging;2 days	
Natl. Cable TV Assn.		5/20/21	RT Air DC/Atlanta;meals,lodging;1 day	
Edison Electric Institute		4/9-12/90	RT air DC/Captiva, FL;meals,lodging; 3 days;self/spouse	
First Natl. Bankers		7/4-7/90	DC/San Destin, FL;lodging,meals;3 days;self/spouse	
Satellite Broadcasters Assn.		7/8-9/90	RT air DC/Nashville, TN;lodging,meals;1 day	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

(continued)

Wilbert J. Tauzin, II

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Coca Cola		11/13-15	RT air DC/Calloway Gardens,GA;lodging,meals; 2 days	
			self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

WILBERT J. TAUZIN, II

Reporting Individual's Name
Wilbert J. Tauzin, II

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	St. Charles Royalle Subdivision; Lafourche Parish, Louisiana
Director (inactive)	First Financial Bank (formerly S. La. Savings & Loan) Thibodaux, LA

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Wilbert J. Tauzin II	May 15, 1991

GPO 1991 37-598 (m)

Attachment for Section III.

A. Citizens Bank and Trust shares (Now First Interstate Bank)

B. St. Charles Royalle Subdivision interest

A. Two Hundred (200) shares of the common stock of Citizens Bank & Trust Company, Thibodaux, Louisiana, represented by Certificate Nos. 2443 for ten (10) shares, 3213 for ten (10) shares, 5297 for twenty (20) shares and 11817 for one hundred sixty (160) shares, each such certificate being registered in the name of The Honorable Wilbert J. Tauzin, II.

B. An undivided one-third (1/3rd) interest in and to the minerals in, on and underlying the following described property situated in LaFourche Parish, Louisiana, to-wit:

North One Half (N/½) of Lot Four (4), Lots Three (3), Two-A (2-A), Two-C (2-C), Two-D (2-D), Two-E (2-E), South Half (S/½) of Lot Two-G (2-G) and Lot Two-H (2-H), Block One (1);

Lots Four (4), Five (5) and Eleven (11) of Block Two (2);

Lots Seven (7), Eight (8), Ten (10) and Twelve (12) of Block Three (3);

Lots Six (6), Eight (8), Nine (9), Ten (10), Eleven (11), Thirteen (13), Fourteen (14), Fifteen (15) and the North Sixty-seven and 25/100 (N/67.25') feet of Lot Sixteen (16) of Block Four (4);

Lots Three (3), Four (4), Five (5), Six (6), Seven (7), Eight (8), Nine (9) and Ten (10) of Block Five (5);

Lots One (1), Two (2), Three (3), Four (4), Five (5), Six (6), Seven (7), Eight (8), Nine (10), Ten (10), Eleven (11), Twelve (12) and Thirteen (13) of Block Six (6);

The South Half (S/½) of Lot Two (2) and Lots Three (3), Four (4), Seven (7), Eight (8), Nine (9), Ten (10), Eleven (11), Twelve (12), Thirteen (13), Fourteen (14), Fifteen (15), Eighteen (18) and Twenty (20) of Block Nine (9);

Lots Two (2), Three (3), Four (4), Five (5), Ten (10), Eleven (11), Thirteen (13) and the South Half (S½) of Lot Nine (9) of Block Ten (10);

Lots One (1) and Two (2) of Block Eleven (11).

All as more clearly shown on a Survey Map Showing St. Charles Royalle Subdivision, situated in Sections Twenty-one (21) and Twenty-two (22), Township Fifteen (15) South, Range Seventeen (17) East, LaFourche Parish, State of Louisiana, said Map being recorded under Entry No. 593700 of the Records of LaFourche Parish and dated January 7, 1974, revised February 5, 1975, and August 25, 1983.

Being a portion of the property acquired by Wilbert J. Tauzin, II and Gayle Clement Tauzin by Act of Partition dated April 5, 1984, and recorded under Entry No. 603326 of the Records of LaFourche Parish, Louisiana.

4. An undivided one-third (1/3rd) interest in and to the following described property located in LaFourche Parish, Louisiana, to-wit:

Lot Two-F (2-F) and the North Half (N½) of Lot Two-G (2-G) of Block One (1);

Lots Eight (8) and Nine (9) of Block Two (2);

Lot Eleven (11) of Block Three (3);

Lots Seventeen (17) and Eighteen (18) of Block Seven (7);

Lots Five (5), Six (6), Seven (7) and Seventeen (17) of Block Nine (9);

Lots Six (6) and Seven (7) of Block Ten (10);

Lot Five (5) and the South Half (S/2) of Lot Four (4) of Block Eleven (11).

All as more clearly shown on a Survey Map Showing St. Charles Royalle Subdivision, situated in Sections Twenty-one (21) and Twenty-22), Township Fifteen (15) South, Range Seventeen (17) East, LaFourche Parish, State of Louisiana, said Map being recorded under Entry No. 593700 of the Records of LaFourche Parish, and said map being dated January 7, 1974, and revised February 5, 1975, and August 25, 1983.

Being a portion of the property acquired by act recorded October 16, 1973, under Entry No. 377166 of the Records of LaFourche Parish, Louisiana.

5. The following described property located in LaFourche Parish, Louisiana, to-wit:

Lot Ten (10) of Block Three (3);

Lots Six (6), Ten (10), Twelve (12), Fourteen (14) and the North Sixty-seven and 25/100 (N/67.25') feet of Lot Sixteen (16), of Block Four (4);

Lots Six (6) and Seven (7) of Block Five (5);

Lots Four (4), Six (6), Ten (10), Twelve (12) and Thirteen (13) of Block Six (6);

Lots Eight (8), Twelve (12) and Fourteen (14) of Block Nine (9);

The South Half (S½) of Lot Nine (9) and Lots Ten (10) and Thirteen (13) of Block Ten (10);

Lot Two (2) of Block Eleven (11).

All as more clearly shown on a Survey Map Showing St. Charles Royalle Subdivision, situated in Sections Twenty-one (21) and Twenty-two (22), Township Fifteen (15) South, Range Seventeen (17) East, LaFourche Parish, State of Louisiana, said Map being recorded under Entry No. 593700 of the Records of LaFourche Parish, and said map being dated January 7, 1974, and revised February 5, 1975, and August 25, 1983.

Being a portion of the same property acquired by Wilbert J. Tauzin, II and Gayle Clement Tauzin, by Act of Partition, dated April 5, 1984, and recorded under Entry No. 603326 of the Records of LaFourche Parish, Louisiana.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Charles Hart Taylor
(Full Name)

P.O. box 66
(Mailing Address)

Brevard, NC 28702

Filer Status	[X] Member of the U S House of Representatives — State NC District 11th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Financial Guaranty Corporation	Director's Fee	$19,300	
	Financial Guaranty Corporation	Spouse, Director's Fee	NA	
	Financial Guaranty Corporation	Guaranty Fee	$36,000	

Reporting Individual's Name
Charles H. Taylor

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X									X					
	182 Main Street, Dover, Delaware				X							X								X							
JT	Southeastern Real Estate & Discount Company								X								business income								X		
JT	Translyvania Tree Farms								X								business income							X			
S	Major Land & Timber partnership, owning tree farm, @3500 acres,								X								none										
	Haywood, NC																										
	and note receivable from Maggie Valley Development Corporation						X						X												X		
DC	RFD Old 64, Brevard, NC House			X								X									X						

...rned income.

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles H. TAylor

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1 001)	B $1 001 - $15,000	C $15,001 - $50,000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1 000	III $1 001 - $2 500	IV $2 501 - $5 000	V $5 001 - $15,000	VI $15,001 - $50 000	VII $50 001 - $100 000	VIII $100 001 - $1 000 000	IX over $1 000 000	
	~~Cedar Creek Farms, Ltd. partner~~ship, owning Cedar Creek Farms, ~~Jackson County, NC~~				X									X							X						X
	~~and notes receivable from Thomp~~son et.al.		X										X						X								
	~~Family IV partnership, owning~~ intellectual property, Asheville, NC		X														royalties	X									
	Gaybo Company partnership, owning 22 acres commercial land, Maggie Valley, NC					X											business income	X									
S, DC, JT	Blue Ridge Savings Bank accounts			X									X									X					
S	Blue Ridge Savings Bank stock						X										none										
	Note Receivable from Bank Properties, Ltd.			X									X							X							
S, DC, JT	Financial Guaranty Corporation stock								X								none										
	Note Receivable from Financial Guaranty Insurance Company			X									X									X					
	Loans to Taylor for Congress						X										none										
	McCrae Industries stock			X							X									X							
S	Monte Vista Corporation stock							X									none										

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles H. Taylor

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
JT	Riverside Company Estates partnership, owning Riverside Estates, Brevard, NC			X													none										

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Reporting Individual's Name
Charles Hart Taylor

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Cedar Creek Farms, Ltd. sales:											
	-- lot sale, 3.12 acres		X		02-15-90	X						
	-- lot sale, 3.57 acres		X		04-23-90	X						
	-- lot sale, 3.65 acres		X		10-10-90	X						
S,DC JT	FGIC stock exchanged for FGC stock in corporate reorganization (no net gain)			X	01-08-90							X

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
DC	Brevard Federal Savings And Loan	Mortgage on RFD Old 64		X					

Reporting Individual's Name

Charles Hart Taylor

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
	NA	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
			NA	

*[illegible] reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Charles Hart Taylor

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
	See Attached Schedule

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Charles H. Taylor

DATE (Month, Day, Year): 5-15-91

Charles H. Taylor
Personal Financial Disclosure
Current calendar year
Part VII- Positions

Position	Organization
Partner	Gaybo Company
Partner	Cedar Creek Farms
Partner	Riverside Company Estates
Partner	Family IV
Director (not compensated)	North Carolina 4-H Development Fund
Chairman (not compensated)	Western Carolina 4-H Leadership Fund
Director (not compensated)	Board of Visitors: Wake Forest University Law School
Member	Society of American Forestry
Member	North Carolina State Legislative Park Study Commission - commission terminated 1/91
Director (not compensated)	"Cradle of Forestry" Interpretive Association
Member	North Carolina Forestry Association
Director (compensated 1990, not compensated 1991)	Financial Guaranty Corporation
Director (compensated until re-organized into FGC in 1990)	Financial Guaranty Insurance Company - reorganized into Financial Guaranty Corporation
Member	Western Carolina Environmental Commission - no longer a member
Chairman (not compensated)	North Carolina Parks & Recreation Council and Foundation - no longer a member

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 AM 11:40

OFFICE OF PAYMASTER
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Gary Eugene Taylor
(Full Name)

814 N. Beach Blvd.
(Mailing Address)

Bay St. Louis, MS 39520

Filer Status	[X] Member of the U.S. House of Representatives — State: MS District: 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc (Office Use Only) 5

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Public Employees Retirement System of MS	withdrawl of accumulated contributions	8,281.	

4449

Reporting Individual's Name
Gary Eugene Taylor

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
	G.E. Taylor, Inc.		X								X								X							
	Stone Corrugated, Inc.		X								X								X							

Reporting Individual's Name

Gary Eugene Taylor

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Stone Corrugated, Inc.		X		12-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
Gary Eugene Taylor

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342).

Reporting Individual's Name
Gary Eugene Taylor

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board Member	G.E. Taylor, Inc.

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app. 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL
Gary Eugene Taylor

DATE (Month, Day, Year)
5-14-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 12 35

HAND DELIVERED

Craig Lyle Thomas
(Full Name)
1721 Longworth House Office Building
(Mailing Address)
Washington DC 20515

Filer Status	☑ Member of the U.S. House of Representatives — State: Wyoming District: At-Large	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Arlington County School District	spouse salary	NA	

For additional earned income, use next page

4454

Reporting Individual's Name
CRAIG THOMAS

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X							X
	George Wash Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
	American Tel: Tel (stock)		✓								✓							✓								
	Honeywell (stock)		✓								✓							✓								
	Louise Roberts (trust)* 1/5 interest				✓						✓								✓							
	Key Bank (account)			✓									✓						✓							
	Kemper Cash Equivalent (shares)		✓								✓							✓								
	National Security Fund (shares)		✓								✓							✓								

For additional assets and unearned income, use next page

Individual's Name: CRAIG THOMAS

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
A-C Partners (partnership)						✓							✓						✓							
Caterpiller Common (stocks)			✓								✓							✓								
Aspen Exploration (stock)		✓									✓						✓									
Zero Coupon Bonds			✓										✓				✓									
Alliance Quasar Fund				✓							✓						✓									
Alliance Fund				✓							✓						✓									
ECC International (stock)		✓									✓						✓									
Kemper Total Return Fund			✓								✓						✓									
Colorado Bank Shares			✓								✓						✓									
Sergeant at Arms (savings deferred)			✓										✓				✓									
Sergeant at Arms (checking)			✓										✓				✓									
Arlington School Credit Union (checking)			✓										✓				✓									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG THOMAS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
*listing of Louise Roberts Trust																										
Kemper Cash Equivalent Fund			✓								✓								✓							
American Tel: Tel (stocks)			✓								✓								✓							
H:R Block (stocks)			✓								✓								✓							
Dun: Bradstreet (stocks)				✓							✓								✓							
Exxon Corporation (stocks)			✓								✓								✓							
General Electric (stocks)			✓								✓								✓							
Honeywell (Stocks)				✓							✓								✓							
Houston Industries (stocks)			✓								✓								✓							
Petrie Stores (stocks)			✓								✓								✓							
Pillsbury (stocks)			✓								✓								✓							
Union Pacific (stocks)			✓								✓								✓							
Western Investors Real Estate (limited partnership)			✓								✓								✓							
Sweetwater, County Wyoming Pollution Control (revenue bond)			✓								✓								✓							
Uinta County, Wyoming, school district (bonds)			✓								✓								✓							
Yavapai County, Az, school district (bonds)			✓								✓								✓							

Reporting Individual's Name
CRAIG THOMAS

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Wyoming National Bank	Mortgage 3907 Dorset Casper Wy			✓				
	Crestar Bank	Mortgage 1221 South 35th St Arlington VA				✓			

Reporting Individual's Name: CRAIG THOMAS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ✓

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
National Rural Electric CoOp Assn Speech		Mar 18-19, 1990	Airtravel Wy to San Antonio to DC, lodging, meals	
National Rural Electric CoOp Assn Speech		Aug 12-13, 1990	Roundtrip Wy to San Diego, lodging, meal	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
CRAIG THOMAS

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
General Partner	A-C Torrington Venture
General Partner	A-C Fairview Venture

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☑

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☑ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☑ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Craig Thomas	15 May 91

GPO 1991 37-59[illegible] (m)

CRAIG THOMAS
WYOMING

HAND DELIVERED

WASHINGTON OFFICE
1721 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2311

Congress of the United States
House of Representatives
Washington, DC 20515

May 29, 1991

MC (1)

1991 MAY 29 PM 4:36

Clerk, U.S. House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, DC 20515

As requested, the following is a clarification of my 1990 Financial Disclosure Statement, referred to on the Form A Checklist:

Part II. Assets

The 4-C Partners (Torrington Venture) is the Kings Inn motel and restaurant in Torrington, Wyoming. It was listed in the 1989 Disclosure Statement as "Kings Inn Motel Partnership." The 4-C Partners (Fairview Venture) is a hollow partnership and will be dissolved this year. There have been no assets since 1986 and was only reported this year due to your new format.

Part IV. Transactions

Colorado Bank shares were listed in the first Financial Disclosure Statement of 1989, upon my election, as Colorado National Bank. The accurate title is Colorado National Bank Shares. It is a common stock now worth $9,000 and pays around $80 a year in dividends. It was acquired in January of 1989 and there have been no transactions since. The omission of this holding from the year-end 1989 Statement was simply an oversight.

I hope this clears up any questions you may have.

Cordially,

Craig Thomas

Craig Thomas
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
91 MAY 15 PM 5:07
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 19

4462

Robert Lindsay Thomas
(Full Name)

240 Cannon House Office Building
(Mailing Address)

Washington, DC 20515-1001

Filer Status	X Member of the U.S. House of Representatives — State: Ga District: 1st	☐ Officer or Employee	Employing Office:
Report Type	X Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute, Washington, D.C. (Jan. 30, 1990)	Speech	$2,000	
	Gold Kist, Macon, Georgia, (Mar. 2, 1990)	Speech	$1,000	
	Philip Morris, Washington, D.C. (Apr. 18, 1990)	Speech	$2,000	
	Brown-Williamson, Macon, Georgia (May 14, 1990)	Speech	$1,500	
	RJR Nabisco, Washington, D.C. (July 12, 1990)	Speech	$2,000	
	Chicago Merchantile Exchange, Chicago, IL (Sept. 24, 1990)	Speech	$750	
	Chicago Board of Trade, Chicago, IL (Sept. 24, 1990)	Speech	$750	
	Textron Corp., Washington, D.C. (Dec. 13, 1990)	Speech	$2,000	
	Dairymen, Inc., Nashville, TN (Dec. 14, 1990)	Speech	$2,000	
	Georgia Southern University	Spouse salary	n/a	

For additional earned income, use next page

Reporting Individual's Name

R. Lindsay Thomas

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Estate of George Fry, (spouse)	Executor's fee	$2,500	

Reporting Individual's Name

R. Lindsay Thomas

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
S	Prudential Bache Securities				X	($65,215)					X									X	($1,690)						sale/purchase
	Federal Land Bank stock		X	($1,500)							X							X	($0)								
	700 acre farm tract, Wayne Co., Ga.						X	($310,000)				X										X	($12,100)				[redacted]
	House and 15 acres, Wayne Co., Ga.					X	($125,000)					X										X	($5,400)				
S	Estate of George Fry		unknown								X		X	from			bequest		X	($375)							
S	Interstate/Johnson Lane IRA		X	($5,993)							X		X						X	($702)							

For additional assets and unearned income, use next page

4464

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: R. Lindsay Thomas

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	127 acres planted pine, Wayne County			X	($55,000)																					sold
S	Core Credit Union, Statesboro, Ga.		X										X				X	($61)								
S	Sea Island Bank, Statesboro, Ga.		X										X					X	($259)							
S	Sea Island Bankshares, Statesboro, Ga.		X								X						X	($88)								
	Interstate Johnson Lane/Barnett Bank		X	($2,042)									X				X	($134)								
	Congressional Federal Credit Union		X										X				X	($175)								
	Tobacco allotment - part of 700 acre farm tract, Wayne Co.			X	($25,378)																					sold
	Interstate/Johnson Lane IRA		X	($7,309)							X		X					X	($864)							

Reporting Individual's Name
R. Lindsay Thomas

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	127 acres planted pine, Wayne Co., Ga.		X		3-13-90			$55,000				
S	Prudential Bache Securities - Coca Cola Co.	X			9-28-90			$3,995				
S	Prudential Bache Securities - SONAT Inc.		X		8-31-90			$3,844				
	Tobacco allotment - part of 700 acre farm tract, Wayne Co., Ga.		X		1-30-90			$25,378				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Federal Land Bank - mortgage on 127 acres.	Mortgage on 127 acres, Wayne Co.		$29,750					
	First National of Wayne County	Mortgage on 127 acres, Wayne Co.		$7,000					
	Patterson Bank, Patterson, Ga.	Mortgage on Grace Acres Farm,		$145,000					
		- Wayne County, Ga. -							

Reporting Individual's Name
R. Lindsay Thomas

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Conservation Foundation	May 11, 1990	Air Travel from Wash., D.C. to Columbia, S.C., to Savannah, GA	
Chicago Merchantile Exchange	Sept.23-24	Air Travel from Savannah to Chicago to DC, 1 day food &lodging	
National Entomological Society	December 2-3	Air Travel from Savannah to New Orleans Roundtrip, 1 night lodging, food	
Dairymen, Inc.	December 13-14	Air Travel DC to Nashville to Savannah, 1 day food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
R. Lindsay Thomas

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert Lindsay Thomas	5/13/91

GPO 1991 37-598 (m)

ATTACHMENT FOR PARTS II & III, ITEM # 6

Interstate/Johnson Lane

Statement of Account

044445

Account Number [redacted]

Tax ID Number [redacted]

For the Period Page 1

12/01/90 Through 12/31/90

MELINDA FRY THOMAS IRA
IS/JL AS CUST. F/B/O
101 OLDE TOWNE DRIVE
STATESBORO GA 30458

Your Account Executive

CRAIG BARROW, III
(912) 238-7101

Office Serving Your Account

INTERSTATE/JOHNSON LANE
101 EAST BAY STREET
SAVANNAH, GA 31401

Monthly Statement Summary

SUMMARY OF PORTFOLIO AS OF 12/31/90

Description	Amount
SECURITY VALUES (for securities that are priced)	
CASH ACCOUNT	$4,956.00cr
TOTAL SECURITY VALUE	$4,956.00cr
CASH & CORTLAND BALANCES	
CASH ACCOUNT	$1,036.56cr
TOTAL CASH & CORTLAND BALANCES	$1,036.56cr
TOTAL PORTFOLIO VALUE	$5,992.56cr

SUMMARY OF ACCOUNT ACTIVITY

Description	Amount
COMBINED OPENING BALANCE	$931.16cr
CREDITS DIVIDEND AND INTEREST INCOME	$105.40cr
TOTAL CREDITS	$105.40cr
DEBITS	
TOTAL DEBITS	$0.00
COMBINED CLOSING BALANCE	$1,036.56cr

$2000 IRA CONTRIBUTION YEAR 1985
$2000 IRA CONTRIBUTION YEAR 1986
$25 CUSTODIAN FEE 1988
$30 CUSTODIAN FEE 1989
$30 CUSTODIAN FEE 1990

Description	Current	Year to Date
TOTAL TAXABLE DIVIDENDS	$0.00	$120.00cr
TAXABLE CORP/GVT BOND INTEREST	$100.00cr	$522.50cr
CREDIT INTEREST	$5.40cr	$59.12cr

701.62

This statement reflects year-end values reported to the IRS per regulation. Some illiquid securities not ordinarily priced by our pricing service have been priced on this statement, based upon quotes from outside sources, which we cannot guarantee. Other securities, which do not regularly trade on any recognized market, are not valued. Certificates of Deposit ("CD'S") are valued at par (100%). Actual liquidation values prior to maturity may be higher or lower.

ATTACHMENT TO PARTS II & III

Interstate/Johnson Lane

Statement of Account

044446

Account Number	Tax ID Number	For the Period	Page 2
521-80669 - V23	258-66-9271	12/01/90 Through 12/31/90	

DAILY ACCOUNT ACTIVITY

DATE	TRANS	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT	BALANCE
		CASH ACCOUNT - 17					
2/01/90		BALANCE FORWARD				931.15	931.15cr
2/17/90	Interest	BEST BUY INC SUB NT EXTIBLE ADJ RATE-REG DUE 06/15/1997 10.000 REG INT ON 2000 BND REC 11/30/90 PAY 12/15/90				100.00	1,031.15cr
12/17/90	Interest	INTEREST ON CREDIT BALANCE AVERAGE DAILY RATE FROM 11/16 TO 12/15 WAS 6.85% WHICH WOULD YIELD 7.18% ANNUALLY				5.40	1,036.55cr

PORTFOLIO POSITIONS

QUANTITY	SECURITY DESCRIPTION	PRICE ON 12/31/90	MARKET VALUE	PORTFOLIO PCT	DIV RATE OR INT %	ESTIMATED ANNUAL INCOME
	CASH ACCOUNT - 17					
120	TEXFI INDUSTRIES INC-CUM PFD 1988B SERIES	9.625	$1,155.	23.30	1.00	$120.00
2,000	BEST BUY INC SUB NT EXTIBLE ADJ RATE-REG DUE 06/15/1997 10.000% JD 15	90.000	$1,800.	36.32	10.00	$200.00
2,000	EASTMAN KODAK CO NOTES-REG DUE 04/15/2000 9.500% AO 15	100.056	$2,001.	40.38	9.50	$190.00
	TOTAL CASH ACCOUNT VALUE		$4,958.00	100.00		$510.00
	TOTAL VALUE OF PRICED SECURITIES		$4,956.00	100.00		$510.00

End of Statement

ATTA

P. O. BOX 568
STATESBORO, GA. 30458

Dividends and Distributions
COPY B

WHOM PAID If your tax identifying number is not shown incorrectly shown, please furnish correct number to the payer	Recipient's identifying number	1a Gross dividends and other distributions on stock (Total of 1b, 1c, 1d and 1e)	1b Ordinary dividends	1c Capital gain distributions	1d Nontaxable distributions
[redacted]		88.00	88.00	.00	.00
				1e Investment expenses	2 Federal income tax withheld
				.00	.00
				3 Foreign tax paid	4 Foreign country or U.S. possession
				.00	
				LIQUIDATION DISTRIBUTIONS	
				5 Cash	6 Noncash (Fair market value)
				.00	.00

ATTACHMENT PARTS II & III - Item #10

MELINDA F THOMAS
101 OLDE TOWNE DRIVE
STATESBORO GA 30458

M 1099 DIV. SUBSTITUTE — This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this dividend income is taxable and the IRS determines that it has not been reported.

BY WHOM PAID
SEA ISLAND BANK
2 E. MAIN ST.
STATESBORO, GA. 30458

[redacted]

PAYER'S IDENTIFYING NUMBER	1 Earnings from savings and loan associations, credit unions, bank deposits, bearer certificates of deposit, etc.	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction will be imposed on you if this income is taxable and the IRS determines that it has not been reported.		
[redacted]	259.10	2 Early withdrawal penalty	3 U.S. Savings Bonds, etc.	4 Federal income tax withheld
		.00	.00	.00

TYPE	ACCOUNT NUMBER	INTEREST EARNED	FORFEITURE	FEDERAL TAX WITHHELD
CHECKING	11029512	153.09	.00	.00
CERTIFICATE	91691:490	106.01	.00	.00

ATTACHMENT PARTS II & III - Item #9

COPY B
For Recipient

RECIPIENT'S IDENTIFYING NUMBER
[redacted]

90
Statement for Recipients of Interest Income

TO WHOM PAID
If your tax payer identifying number is not shown or is incorrectly shown, please furnish the correct number to the payer.

MELINDA FR THOMAS
1 1 OLDE OWN E DRIVE
STATES ORO G. 3.458-5.29

TAX STATEMENT FOR CALENDAR YEAR 1990

SUBSTITUTE FORM 1099 DIV DIVIDENDS AND DISTRIBUTIONS PAID BY BARNETT BANKS, INC.

$2,000

Payer's Federal Identification number [redacted]

1a Gross dividends and other distributions on stock (Total of 1b, 1c, 1d and 1e)	1b Ordinary dividends	1c Capital gain distributions	1d Nontaxable distributions	Copy B For RECIPIENT
133.56	133.56.			
1e Investment expenses	2 Federal income tax withheld	3 Foreign tax paid	Service Fees (Included in Box 1a)	Commission (Included in Box 1a)
4 Foreign country or U.S. possession	LIQUIDATION DISTRIBUTIONS 5 Cash	6 Noncash (fair market value)	Additional dividends due to dividend reinvestment and/or stock purchase plan (included in Box 1a)	

NA 13 '91 (2:50) GSU UNIVERSITY DEPEL PAGE 014

ATTACHMENT PARTS II & III - ITEM #11

ATTACHMENT TO PARTS II & IV

Item #1 Item #2 & 3

Consolidated Statement 1990 Prudential-Bache

Command Account

For the Period: Jan 1 - Dec 31, 1990

Account Number [redacted]

Important Tax Information. This is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction will be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Prudential-Bache Securities Inc Federal ID Number: 22-2347336

Your Financial Advisor:
JANE O WERNDON
945 BROADWAY
SUITE 100
COLUMBUS, GA 31901
404-322-4541

Your Federal ID Number: [redacted]

MELINDA F THOMAS
101 OLD TOWNE DRIVE
STATESBORO GA 30458-5829

1099-DIV Dividends and Distributions

OMB NO. 1545-0110

1a Gross dividends and other distributions on stock (Total of 1b, 1c, 1d, and 1e)	1,690.21	2 Federal income tax withheld	0.00
1b Ordinary dividends	1,690.21	3 Foreign tax paid	0.00
1c Capital gains distributions	0.00	4 Foreign country or U.S. possession	
1d Nontaxable distributions	0.00	5 Liquidation distributions (cash)	0.00
1e Investment expenses	0.00	6 Liquidation distributions (noncash)	0.00

1099-B Proceeds From Broker and Barter Exchange Transactions

OMB NO. 1545-0715

1a Date of sale	various	5 Description	various
1b CUSIP Number	various	6 Profit or (loss) realized in 1990	0.00
2 Stocks, bonds, etc. Reported to IRS gross proceeds less commissions	3,844.21	7 Unrealized profit or (loss) on open contracts—12/31/89	0.00
3 Bartering	0.00	8 Unrealized profit or (loss) on open contracts—12/31/90	0.00
4 Federal income tax withheld	0.00	9 Aggregate profit or (loss)	0.00

Substitute IRS 1099 forms above dotted line.

✂

Dividends received on securities

PAYMENTS	PAYOR	DOLLAR AMOUNT	TAX CLASS	COMMENTS	REPORTED ON
4	BANK SOUTH CORP	100.00	INCOME		1099-DIV
13	CAT MTL MONEY	202.04	INCOME		1099-DIV
0	CAT MTL MONEY	.77	INCOME	REPORTED 1990, PAYABLE 1991	1099-DIV
1	COCA COLA COMPANY DELAWARE	20.00	INCOME		1099-DIV
4	DOMINION RES INC VA	221.10	INCOME		1099-DIV
4	INTERFACE INC	48.00	INCOME		1099-DIV
4	SCIENTIFIC ATLANTA INCORPORATED	12.00	INCOME		1099-DIV
2	SONAT INCORPORATED	75.00	INCOME		1099-DIV
4	SYNOVUS FINANCIAL CORPORATION	735.50	INCOME		1099-DIV
4	TOTAL SYSTEMS SERVICES INCORPORATED	103.32	INCOME		1099-DIV
4	UNION CAMP CORPORATION	172.48	INCOME		1099-DIV
TOTAL INCOME - DIVIDENDS		$1,690.21			

-00081

Client Statement

Prudential-Bache

Securities Account

MELINDA F THOMAS | Dec 1 - Dec 31, 1990 | Account Number: TBR-828681-84 |

DESCRIPTION	QUANTITY	PRICE	VALUE	EST. INCOME	COMMENTS
TOTAL SYSTEMS SERVICES INCORPORATED	369	32.500	$11,992.50	$183.32	.86 % YIELD
UNION CAMP CORPORATION	112	35.750MM	$4,004.00	$174.72	4.36 % YIELD
VIACOM INCORPORATED	125	26.250	$3,281.25		
VIACOM INCORPORATED NON VOTING	125	24.625	$3,078.13		
SECURITIES VALUE			$46,215.13	$1,525.42	2.63 % YIELD
CAT NATIONAL MONEY MKT FUND	377.320	1.000	$377.32	$29.03	7.74 % YIELD
MONEY MARKET FUNDS			$377.32	$29.03	

WE EXTEND TO YOU AND TO ALL OUR VALUED CLIENTS OUR SINCERE BEST WISHES FOR A HAPPY, HEALTHY AND PROSPEROUS NEW YEAR.
IT IS A PLEASURE FOR US TO SERVE YOUR INVESTMENT AND FINANCIAL NEEDS.

Client Statement

Prudential-Bache

Securities Account

For the Period: Dec 1 - Dec 31, 1990

Account Number: TBR-028681-04

Net Worth

	OPENING	CLOSING
SECURITIES VALUE	$61,685.14	$65,215.13
MONEY MARKET FUNDS	$251.55	$377.32
CASH BALANCE	$.76	$.20
TOTAL NET WORTH	$61,937.45	$65,592.65

Income

	THIS PERIOD	YEAR TO DATE
MONEY FUND DIVIDENDS	$1.77	$282.04
DIVIDENDS	$123.44	$1,407.40
TOTAL INCOME	$125.21	$1,689.44

Your Financial Advisor:
JANE D NEWBOW
945 BROADWAY
SUITE 100
COLUMBUS, GA 31901
404-322-4541

Your Federal ID Number: 258-66-9271

MELINDA F THOMAS
101 OLD TOWNE DRIVE
STATESBORO GA 30458-5829

DATE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE/ENTRY	AMOUNT CHARGED	AMOUNT CREDITED
12/12	Dividend		DIV ON 75 SCIENTIFIC ATLANTA	Income		$3.00
12/13	Dividend		DIV ON 112 UNION CAMP CORP	Income		$43.68
12/17	Purchased	47	CAT NTL MONEY FD	1.00	$47.00	
12/17	Dividend		DIV ON 100 COCA COLA CO DEL	Income		$20.00
12/20	Dividend		DIV ON 66 DOMINION RES INC VA	Income		$56.76
12/21	Dividend	1.770	CAT NTL MONEY DIV REINV 11/16 - 12/20	Money Fund		
12/24	Purchased	77	CAT NTL MONEY FD	1.00	$77.00	

DESCRIPTION	QUANTITY	PRICE	VALUE	EST. INCOME	COMMENTS
BANK SOUTH CORP	200	6.250	$1,250.00	$104.00	8.32 % YIELD
COCA COLA COMPANY DELAWARE	100	46.500**	$4,650.00 ✓	$80.00	1.72 % YIELD
DOMINION RES INC VA	66	46.875**	$3,093.75 ✓	$227.04	7.34 % YIELD
HERITAGE MEDIA CORPORATION	250	3.375	$843.75		
INTERFACE INCORPORATED CLASS A	200	9.750	$1,950.00	$48.00	2.46 % YIELD
SCIENTIFIC ATLANTA INCORPORATED	75	12.500**	$937.50	$12.00	1.28 % YIELD
SYNOVUS FINANCIAL CORPORATION	2,043	14.750	$30,134.25 ✓	$776.34	2.58 % YIELD

4474

Consolidated Statement 1990 Prudential-Bache

Command Account

MELINDA F THOMAS | Jan 1 - Dec 31, 1990 | Account Number: TBR-028681-04 | Page 2 of 2

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ome

PAYMENTS	PAYOR	DOLLAR AMOUNT	SHARES	EXPLANATION	COMMENTS	REPORTED ON
1	VIACOM INCORPORATED NON VOTING		125	STOCK DIV		

ding
ivity

DESCRIPTION	QUANTITY	TRADE DATE	SETTLEMENT DATE	NET COST	NET PROCEEDS	EXPLANATION	ACCRUED INTEREST	REPORTED ON
COCA COLA CO DEL	100	09/21/90	09/28/90	3,994.73		BOUGHT		
SONAT INC CUSIP: 835416100	75	08/24/90	08/31/90		3,844.21	SOLD		1099-B

CONGRESSIONAL FEDERAL CREDIT UNI
PO BOX 23267
WASHINGTON, DC 20026-3267

OMB No. 1545-0112

1990

Statement for Recipients of

Interest 021

REMOVE THIS STUB TO OPEN

PAYER'S Federal identification number: [redacted]

RECIPIENT'S identification number: [redacted]

1 Earnings from savings and loan associations, credit unions, bank deposits, bonds or certificates of deposit, etc.: $ 175.36

RECIPIENT'S name, address, and ZIP code:

LINDSAY THOMAS

427 CHOR US HSE OF REPS
WASHINGTON, DC 20515

2 Early withdrawal penalty: $

3 U.S. Savings Bonds, etc.: $

4 Federal income tax withheld: $

5 Foreign tax paid: $

6 Foreign country or U.S. possession: [redacted]

Account number (optional): 7041

Copy B
For Recipient

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

ATTACHMENT PARTS II & III, Item #12

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code:

CORE CREDIT UNION
104 NORTHSIDE DR, WEST
STATESBORO GA 30458

Payer's RTN (optional)

OMB No. 1545-0112

1990

Statement for Recipients of

Interest Income

PAYER'S Federal identification number: [redacted]

RECIPIENT'S identification number: [redacted]

1 Earnings from savings and loan associations, credit unions, bank deposits, bonds or certificates of deposit, etc.: $ 60.62

RECIPIENT'S name (first, middle, last), street, city, state, and zipcode:

MELINDA F THOMAS
101 OLDE TOWNE DRIVE

STATESBORO GA 30458 0000

2 Early withdrawal penalty: $ 0.00

3 U.S. Savings Bonds, etc.: $ 0.00

4 Federal income tax withheld: $ 0.00

5 Foreign tax paid (if eligible for foreign tax credit): $

6 Foreign country or U.S. possession: [redacted]

Account number (optional): 2233000

Copy B
For Recipient

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return a negligence penalty or other sanction will be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Form 1099-INT

Department of the Treasury - Internal Revenue Service

ATTACHMENT PARTS II & III, ITEM # 8

Interstate/Johnson Lane

Statement of Account

A E Copy 148147

Account Number	Tax ID Number
[redacted]	[redacted]

For the Period Page 1

12/01/90 Through 12/31/90

LINDSAY THOMAS IRA
IS/JL AS CUST. F/B/O
431 CANNON BUILDING
WASHINGTON DC 20515

Your Account Executive

CRAIG BARROW, III
(912) 236-7101

Office Serving Your Account

INTERSTATE/JOHNSON LANE
101 EAST BAY STREET
SAVANNAH, GA 31401

ATTACHMENT - PARTS II & III, Item #14

Monthly Statement Summary

SUMMARY OF PORTFOLIO AS OF 12/31/90

Description	Amount
SECURITY VALUES (for securities that are priced) CASH ACCOUNT	$6,081.00cr
TOTAL SECURITY VALUE	$6,081.00cr
CASH & CORTLAND BALANCES CASH ACCOUNT	$1,228.81cr
TOTAL CASH & CORTLAND BALANCES	$1,228.81cr
TOTAL PORTFOLIO VALUE	$7,309.81cr

SUMMARY OF ACCOUNT ACTIVITY

Description	Amount
COMBINED OPENING BALANCE	$1,201.91cr
CREDITS DIVIDEND AND INTEREST INCOME	$26.90cr
TOTAL CREDITS	$26.90cr
DEBITS	
TOTAL DEBITS	$0.00
COMBINED CLOSING BALANCE	$1,228.81cr

Description	Current	Year to Date
TOTAL TAXABLE DIVIDENDS	$20.00cr	$531.10cr
TAXABLE CORP/GVT BOND INTEREST	$0.00	$254.50cr
CREDIT INTEREST	$6.90cr	$78.43cr

$2000 IRA CONTRIBUTION YEAR 1984
$2000 IRA CONTRIBUTION YEAR 1985
$2000 IRA CONTRIBUTION YEAR 1986
$2000 IRA CONTRIBUTION YEAR 1987
$2000 IRA CONTRIBUTION YEAR 1988
$2000 IRA CONTRIBUTION YEAR 1989
$25 CUSTODIAN FEE 1988
$30 CUSTODIAN FEE 1989
$30 CUSTODIAN FEE 1990

$864.03

Interstate/Johnson Lane has a long standing commitment to take the necessary steps to guarantee the safety of your accounts. Your account protection begins with our own financial strength and internal controls, supplemented by external insurance protection.

The enclosed insert explains how your account is covered not only by Interstate/Johnson Lane, but also by the SIPC and Aetna Casualty and Surety Company to a maximum of $2,500,000. While we are confident you will never need any of these safeguards, we value your patronage and want to provide you with the protection and peace of mind you deserve.

Post-It™ brand fax transmittal memo 7671 [redacted]

Interstate/Johnson Lane

Statement of Account

NDSAY THOMAS IRA IS/JL AS COST. 7/8/70 * E Copy 148148

Account Number	Tax ID Number	For the Period	Page 2
521-80423 - V23	256-68-4313	12/01/90 Through 12/31/90	

DAILY ACCOUNT ACTIVITY

DATE	TRANS	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT	BALANCE
		CASH ACCOUNT - 14					
12/01/90		BALANCE FORWARD				1,201 91	1,201.91cr
12/17/90	Interest	INTEREST ON CREDIT BALANCE AVERAGE DAILY RATE FROM 11/16 TO 12/15 WAS 6.85% WHICH WOULD YIELD 7.18% ANNUALLY				6.90	1,208.81cr
12/18/90	Div dend	CENTRAL & SOUTHERN HOLDING CO CASH DIV ON 200 SHS REC 12/07/90 PAY 12/18/90				20.00	1,228.81cr

PORTFOLIO POSITIONS

QUANTITY	SECURITY DESCRIPTION	PRICE ON 12/31/90	MARKET VALUE	PORTFOLIO PCT	DIV RATE OR INT %	ESTIMATED ANNUAL INCOME
	CASH ACCOUNT - 14					
200	CENTRAL & SOUTHERN HOLDING CO	5.250	$1,050.	17.26	.40	$80.00
300	DEL VAL FINANCIAL CORP	1 125	$338.	5.56		
100	GLOBAL YIELD FUND INC	8.000	$800	13.16	.88	$88.00
50	HEALTHVEST SBI	1.750	$88.	1.45		
180	RESIDENTIAL RESOURCES MORTGAGE INVESTMENTS CORP	001	**		.48	$86.00
2,000	ALAGASCO INC DEBS -REG- DUE 05/01/2012 8 750% MN 01 CALL 05/01/92 105.000	90.250	$1,805	29.68	8.75	$175.00
2,000	GREENWOOD TRUST CO C/D-DE-FDIC INSD TO 100M DUE 04/27/1992 8 350% AO 27	100.000	$2,000.	32.89	8.35	$167.00
	TOTAL CASH ACCOUNT VALUE		$6,081.00	100.00		$596.00
	TOTAL VALUE OF PRICED SECURITIES		$6,081.00	100.00		$596.00

Interstate/Johnson Lane

Statement of Account

A E Copy 147655

Account Number	Tax ID Number
[redacted]	[redacted]

For the Period — Page 1

12/01/90 Through 12/31/90

LINDSAY THOMAS
431 CANNON BLDG
WASHINGTON DC 20515

Your Account Executive

CRAIG BARROW, III
(912) 236-7101

Office Serving Your Account

INTERSTATE/JOHNSON LANE
101 EAST BAY STREET
SAVANNAH, GA 31401

ATTACHMENT - PARTS II, III - Item #11

Monthly Statement Summary

SUMMARY OF PORTFOLIO AS OF 12/31/90

Description	Amount
SECURITY VALUES (for securities that are priced) CASH ACCOUNT	$2,001.00cr
TOTAL SECURITY VALUE	$2,001.00cr
CASH & CORTLAND BALANCES CASH ACCOUNT	$41.36cr
TOTAL CASH & CORTLAND BALANCES	$41.36cr
TOTAL PORTFOLIO VALUE	$2,042.36cr

SUMMARY OF ACCOUNT ACTIVITY

Description	Amount
COMBINED OPENING BALANCE	$41.36cr
CREDITS	
TOTAL CREDITS	$0.00
DEBITS	
TOTAL DEBITS	$0.00
COMBINED CLOSING BALANCE	$41.36cr

Description	Current	Year to Date
NONE		

Interstate/Johnson Lane has a long standing commitment to take the necessary steps to guarantee the safety of your accounts. Your account protection begins with our own financial strength and internal controls, supplemented by external insurance protection.

The enclosed insert explains how your account is covered not only by Interstate/Johnson Lane, but also by the SIPC and Aetna Casualty and Surety Company to a maximum of $2,500,000. While we are confident you will never need any of these safeguards, we value your patronage and want to provide you with the protection and peace of mind you deserve.

Post-it™ brand fax transmittal memo 7671 | # of pages ▸ 2

[redacted]

Interstate/Johnson Lane

Statement of Account

ISAY THOMAS 431 CANNON BLDG A E Copy 147868

Account Number	Tax ID Number	For the Period	Page 2
521-60667 - V23	256-68-4313	12/01/90 Through 12/31/90	

DAILY ACCOUNT ACTIVITY

DATE	TRANS	DESCRIPTION	QUANTITY	PRICE	DEBIT	CREDIT	BALANCE
		NONE					

PORTFOLIO POSITIONS

QUANTITY	SECURITY DESCRIPTION	PRICE ON 12/31/90	MARKET VALUE	PORTFOLIO PCT	DIV RATE OR INT %	ESTIMATED ANNUAL INCOME
106	CASH ACCOUNT - 11 BARNETT BANKS INC-W/RTS TO PUR P/STK UNDER CERT CIRCUMSTANCE FORMERLY BARNETT BANKS FLA INC	18 875	$2,001.	100.00	1.32	$140 00
	TOTAL CASH ACCOUNT VALUE		$2,001.00	100.00		$140.00
	TOTAL VALUE OF PRICED SECURITIES		$2,001.00	100.00		$140.00

End of Statement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:28

U.S.

HAND DELIVERED

MC (Office Use Only) 0

William M. Thomas
(Full Name)

2402 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S House of Representatives — State: CA District: 20th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	The Tobacco Institute (Jan. 19, 1990)	Speech	$2,000	
	The Brookings Institute (Jan. 22, 1990)	Speech	$400	
	National Association of Realtors (Jan. 26, 1990)	Speech	$2,000	X ($300)
	Berry Petroleum Company (Feb. 2, 1990)	Speech	$300	
	Petrominerals Corporation (Feb. 2, 1990)	Speech	$200	
	The Tax Council (Feb. 6, 1990)	Speech	$500	
	The Christian Science Monitor (Feb. 8, 1990)	Op Ed Fee	$125	
	Scripps Howard News Service (Mar. 9, 1990)	Op Ed Fee	$200	
	California Grocers Association (Mar. 19, 1990)	Speech	$500	

For additional earned income, use next page

4481

Reporting Individual's Name
William M. Thomas

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Securities Industry Association (Mar. 23, 1990)	Speech	$2,000	
International Council of Shopping Centers (April 2, 1990)	Speech	$2,000	
National Automobile Dealers Association (April 3, 1990)	Speech	$1,500	
The Brookings Institute (April 6, 1990)	Speech	$400	
National Association of Broadcasters (April 16, 1990)	Speech	$2,000	
United States Tobacco Company (May 2, 1990)	Speech	$2,000	
The Brookings Institute (May 7, 1990)	Speech	$400	
Wine Institute (May 18, 1990)	Speech	$1,000	
Massachusetts Mutual Life Insurance (May 23, 1990)	Speech	$2,000	
National Realty Company (May 23, 1990)	Speech	$2,000	
National Association of Real Estate Investment			
Trusts (June 17, 1990)	Speech	$2,000	
American Meat Institute (June 22, 1990)	Speech	$1,500	
Pfizer (July 9, 1990)	Speech	$2,000	
R. Duffy Wall & Associates (Sept. 4, 1990)	Speech	$2,000	X
Baker & Hostetler (Oct. 5, 1990)	Speech	$2,000	X
Eli Lilly & Company (Oct. 17, 1990)	Speech	$1,000	X
Washington Tax Assocation (Dec. 11, 1990)	Speech	$1,000	X

Reporting Individual's Name
William M. Thomas

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X									X							X
			George Wash. Credit Union Accounts			X								X								X						
			182 Main Street, Dover, Delaware				X						X									X						
	Home Mortgage Revenue Bonds				X									X							X							
	IRA-Wright Patman Congressional																											
	Federal Credit Union				X									X							X							

For additional assets and unearned income, use next page

Reporting Individual's Name
William M. Thomas

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Home Mortgage Revenue Bonds (Martinez, CA)		X			X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Dean Witter (Bakersfield, CA)	Loan against Bonds	X						

Reporting Individual's Name
William M. Thomas

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D.C to Seattle, 3 days food & lodging, self and spouse	
***SEE ATTACHMENT				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

PART VII-"REIMBURSEMENTS" & GIFTS OF TRANS., LODGING, FOOD, ENTERTAINMENT

Source	Date	Description
The Tobacco Institute	Jan. 19-21, '90	One-way Air Travel from Bakersfield to Palm Springs to Wash., D.C., 2 days food, lodging & ground transportation (speech)
National Association of Broadcasters	Mar. 31-April 1, 1990	Roundtrip Air Travel from Wash., D.C. to Atlanta, GA, 1 day food & lodging (speech)
Pfizer	July 2, 1990	Roundtrip Air Travel from Wash., D.C. to Orange County & ground transportation (speech)
The Connell Company	April 8-10, '90	2 days lodging, ground transportation & dinner in New York, N.Y., self & spouse (speech)
Tobacco Association of United States	Mar. 2-3, '90	Roundtrip Air Travel from Wash., D.C. to Hilton Head, S.C., 1 day food & lodging (speech)

Reporting Individual's Name
William M. Thomas

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [ ]

Date	Parties To	Terms of Agreement
1974	Kern Community College District	on leave without pay

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
William M. Thomas	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:21
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

RAY THORNTON
(Full Name)

P.O. BOX 826
(Mailing Address)

LITTLE ROCK, AR 72203

Filer Status	[X] Member of the U.S. House of Representatives — State: Arkansas District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

(Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [XX]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

RAY THORNTON

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Category of Value (X)									BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependant child (DC).	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Residential and rental property:																										
	House, 301 N. Main, Sheridan, AR			x								x									x						
	Duplex, 305 N. Main, Sheridan, AR			x								x									x						
	House, The Bluffs, Baxter Co.			x													no income										
	TIAA-CREF					x											pension						x				

For additional assets and unearned income, use next page

4489

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
RAY THORNTON

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Certificate of deposit, checking ~~accounts, Worthen Bank, LR, AR~~				X								X								X					
	Unimproved Land, Grant County, AR:																									
	Timberland: SE SE Sec-28 Twn-4 Rng-13, Frl.																									
	NW NW Sec-34 Twn-4 Rng-13, Frl. SW NW Sec-34 Twn-4 Rng-13, NW SW																									
	Sec-34 Twn-4 Rng-13, Pt. SW SW S. of RR Sec-34 Twn-4 Rng-13, N ½																									
	NE NE Ex 2 A Sec-8 Twn-5 Rng-13, W 2/3 NE NE, Ex .51ac Sec-9 Twn-5 Rng-13, 215 acres total					X											no income									
S	SW SW Sec-35 Twn-4 Rng-12, Frl. ~~NW NW N of Hwy Sec-2 Twn-5~~ Rng-12 75 acres total				X												no income									
S	Pastureland: ~~NE NE Sec-1 Twn-5 Rng-13, E½ E½~~ SE NE N of Rd. Sec-1 Twn-5 Rng-13 50 acres total				X							X							X							
	Lease/rental of mineral rights	X										X						XX								

Reporting Individual's Name

RAY THORNTON

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information see Instructions, page 17

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Troy & Nichols, Dallas	Mortgage on house, 301 N. Main Sheridan, ~~AR~~		X					
RK	Union National Bank, Little Rock	Personal guarantee of loan		X					
S	Grant County Bank, Sheridan, Arkansas	Mortgage on timberland, Grant County ~~(see above)~~		X					

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Reporting Individual's Name
RAY THORNTON

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [xx]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [xxx]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
RAY THORNTON

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE XXX

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE XXX

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ray Thornton	5/15/91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 7:23
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Esteban E. Torres
(Full Name)

1740 Longworth
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 34th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

NC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
See Attached				

For additional earned income, use next page

4494

FINANCIAL DISCLOSURE STATEMENT FOR 1990
ATTACHMENT

Hon. Esteban E. Torres
1740 Longworth
Washington, D.C. 20515

34th District, California

EARNED INCOME, INCLUDING HONORARIA

Source & Date Received	Type	Amount
National Bankers Assn., Washington, D.C. March 13, 1990	Speech	$500.00
Dartmouth College, Tuck School of Business Hanover, NH - August 31, 1990	Speech	$2,000.00
Goethe Institute, Los Angeles November 28, 1990	Speech	$260.00

Reporting Individual's Name
Hon. Esteban E. Torres

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X							
			182 Main Street, Dover, Delaware				X							X								X								
	Wright Patman Credit Union Accounts					X									X						X									
	908 E. Lucille Ave. West Covina, CA									PERSONAL RESIDENCE																				
	10019 Lomond Dr., Manassas, VA							NOT INCOME PRODUCING PROPERTY																						

For additional assets and unearned income, use next page

Reporting Individual's Name: Hon. Esteban E. Torres

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	10019 Lomond Dr., Manassas, VA	X			5/90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Funders Mortgage Corp.	Mortgage on 908 E. Lucille West Covina, CA				X			
	Upland Mortgage Corp.	Mortgage on 10019 Lomand Manassas, VA			X				

Reporting Individual's Name
Hon. Esteban E. Torres

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

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NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
See Attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

FINANCIAL DISCLOSURE STATEMENT FOR 1990

Hon. Esteban E. Torres
1740 Longworth
Washington, D.C. 20515

34th District, California

REIMBURSEMENTS

Source & Date Received	Brief Description
Goethe Institute, Los Angeles November 8-9, 1990	Lodging & food, self & spouse
National Hispanic Business PAC, New York November 29-30, 1990	Round trip air fare D.C.-N.Y.-D.C. & lodging, self & spouse
Dartmouth College, Tuck School of Business Hanover, NH August 30 - September 1, 1990	Air fare L.A.-Lebanon, NH-D.C. food & lodging, self & spouse
Southwest Voter Research Institute, Inc. San Antonio, TX February 23-26, 1990	Round trip air fare D.C.-Nicarague-D.C., food & lodging
America Chamber of Commerce in Hong Kong August 11-21, 1990	Round trip air fare L.A.-Hong Kong-L.A., food & lodging, self & spouse

Reporting Individual's Name
Hon. Esteban E. Torres

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
See Attached	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

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TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Esteban E. Torres	May 15, 1991

GPO: 1991 37-598 (m)

4500

POSITIONS

Trustee	Pan-American development Foundation
Trustee	US committee - UN Children's Emergency Fund (UNICEF)
Advisor	National Democratic Institute for International Affairs
Director	National Association of Latino Elected & Appointed Officials (NALEO)
Director	Congressional Hispanic Caucus Institute, Inc.
Director	California State Society
Co-Chair	National Hispanic Democrats, Inc.
Member	UNA-USA Panel on UNESCO
Chairman	Japan-Hispanic Institute
Director	Coalition for Democratic Values
Founder	Center for National Independence in Politics

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:51
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Robert G. Torricelli
(Full Name)

317 Cannon Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: NJ District: 9	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc (7)
(Office Use Only)

4502

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	See Attachment A			

For additional earned income, use next page

Reporting Individual's Name
Robert G. Torricelli NJ-9

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	U.S. Government Securities -- ~~bonds (I.R.A.S)~~			X									X							X							
	Washington Federal Bank -- ~~C.D.s (I.R.A.s)~~			X									X							X							
	Smith Barney -- Government ~~Securities (I.R.A.s)~~				X								X							X							
	Putnam Convertible Income Growth ~~Fund -- mutual fund (I.R.A.)~~				X								X							X							
	Jersey Bank for Savings -- stock			X																							

For additional assets and unearned income, use next page

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Reporting Individual's Name
Robert G. Torricelli NJ-9

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name
Robert G. Torricelli NJ-9

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
SEE ATTACHMENT B				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
Robert G. Torricelli NJ-9

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	Jersey Bank for Savings (resigned 1/1/91)

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5/15/91

GPO 1991 37-598 (m)

4506

ATTACHMENT A
CONGRESSMAN ROBERT G. TORRICELLI
HONORARIA 1990

Los Angeles Times	1/4/90	article	250.00
RJR Nabisco	1/8/90	honorarium	2000.00
International Chiropractors	1/17/90	honorarium	1000.00
Shipbuilders Council	3/19/90	honorarium	1000.00
Robert K. Huffman	3/23/90	honorarium	500.00
Clarence T. Kipps, Jr.	3/23/90	honorarium	500.00
Rockwell International	3/28/90	honorarium	2000.00
International Chiropractors	4/6/90	honorarium	2000.00
Sea-Land Service	4/18/90	honorarium	2000.00
The Connell Company	4/19/90	honorarium	2000.00
Puerto Rico Marine Management	5/11/90	honorarium	2000.00
Wine Institute	5/16/90	honorarium	1000.00
Wunder, Ryan, Cannon and Thelen	5/17/90	honorarium	2000.00
Edison Electric Institute	5/25/90	honorarium	250.00
USACA	6/4/90	honorarium	2000.00
American Association of Airport Executives	6/18/90	honorarium	500.00
National Business Aircraft	6/19/90	honorarium	500.00
Association for Marriage and Family Therapy	7/16/90	honorarium	1000.00
Bell Helicopter	9/11/90	honorarium	2000.00
Jacobi Society	9/17/90	honorarium	250.00
International Chiropractors	10/4/90	honorarium--articles	1500.00
Henry Clay Society	11/17/90	honorarium	500.00
United Technologies	12/21/90	honorarium	1000.00
American International Group	12/26/90	honorarium	2000.00

TOTAL FOR 1990: 29,750

LIMIT FOR 1990: 26,850

CONTRIBUTED TO CHARITY: 2900

ATTACHMENT B
REIMBURSEMENTS

Harvard University	March 8-9, 1990	Roundtrip airfare, food and 1 night lodging, Boston, MA
International Chiropractors	March 29-30, 1990	Roundtrip airfare, food and 1 night lodging, Tampa, FL
Rockwell International	March 22-24, 1990	Roundtrip airfare, food and 2 nights lodging, Los Angeles, CA
Tulane University	April 2-3, 1991	Roundtrip airfare, food and 1 night lodging, New Orleans,
Independent Television News	June 1-2, 1990	Roundtrip airfare, food and 1 night lodging, London, England
Maritime Institute	Aug. 22, 1990	Roundtrip railfare to Baltimore, MD
Bell Helicopter	Aug. 22-23, 1990	Roundtrip airfare, food and 1 night lodging, Ft. Worth, TX
United Technologies	Dec. 17-18, 1990	Roundtrip airfare, food and 1 night lodging, West Palm Beach, FL

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

Hon. Edolphus Towns
(Full Name)

286 Highland Boulevard
(Mailing Address)

Brooklyn, N.Y. 11207

Filer Status	[X] Member of the U.S. House of Representatives — State: N.Y. District: 11 th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

HAND DELIVERED

(Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	RJR Nabisco (Jan. 3, 1990)	Speech	2,000	
	BellSouth (Jan. 4, 1990)	Speech	2,000	
	Bridge Street AME Church (Jan.14, 1990)	Speech	500	
	Atlantic Richfield Co. (Jan. 17, 1990)	Speech	2,000	
	MCA/PAC Universal Studios (Jan. 18, 1990)	Speech	2,000	
	National Tobacco Council (Jan. 19, 1990)	Speech	2,000	
	Brooklyn Union Gas (Jan. 30, 1990)	Speech	1,000	
	Phillip Morris (Feb. 5, 1990)	Speech	2,000	
	American Nuclear Energy Council (Feb. 8, 1990)	Speech	300	
	Edison Electric Institute (March 7, 1990)	Speech	250	

For additional earned income, use next page

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Reporting Individual's Name
Towns, Edolphus (M.C.)

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Connell Rice & Sugar (March 9, 1990)	Speech	$2,000	
Schering-Plough Corp. (March 15, 1990)	Speech	1,000	
Abbott Labs. (Aprill 11, 1990)	Speech	1,000	
Pfizer Pharmaceutical (April 12, 1990)	Speech	1,000	
Fayetteville State Univ. (May 12, 1990)	Speech	1,000	
National Assoc. of Anestheiologists (May14, 1990)	Speech	2,000	
American Emergency Physicians (May 15, 1990)	Speech	1,000	
Trinity Baptist Church (May 20, 1990)	Speech	300	
American Physical Therapists (May 21, 1990)	Speech	1,000	
Bergner, Boyette & Borkorny (June 13, 1990)	Speech	500	
National Ass'n. of Broadcasters (June 20, 1990)	Speech	1,000	
Connell Rice & Sugar (July 2, 1990)	Speech	2,000	
Equitable Life Insurance Co. (July 23, 1990)	Speech	1,000	
Non-Prescription Drug Manu. Assn. (Sept. 10, 1990)	Speech	2,000	
American Hospital Assoc. (Sept. 24, 1990)	Speech	1,000	
Org. of Prof. Employees of Dept. of Agric. (Dec. 5, 1990)	Speech	750	
	Sub-Total	32,600	
	Donated To Charities	6,950	
	Total	25,650	
New York City Board of Education (Spouse)	Salary		

Reporting Individual's Name
Towns, Edolphus (M.C.)

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																					Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	Congressional Federal Credit Un.				X								X							X									
	Republic National Bank of NY				X										X					X									
	East New York Savings				X										X					X									
	National Westminister Bank				X										X					X									
	Prudential Insurance				X								X							X									
	National Westminister Bank				X										X					X									

For additional assets and unearned income, use next page

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Reporting Individual's Name

Towns, Edolphus, M.C.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 162 Main St. Dover, Del				X			
S	Teachers Retirement System		X						

Reporting Individual's Name
Towns, Edolphus M.C.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
MCA/PAC Universal Studios	1/18-1/19 1990	Roundtrip Airtravel from Washington, D.C. to Los Angeles, Calif, 2 days food and loding, self	X
Fayetteville State Univ.	5/12/90	Roundtrip Airtravel from Washington, D.C. to Fayetteville, N.C., Lunch, self	X

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4513

Reporting Individual's Name

Towns, Edolphus, M.C.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Shaw University , Raliegh, N.C.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
E Towns	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 PM 7:49

James A. Traficant, Jr.
(Full Name)

429 N. Main Street
(Mailing Address)

Poland, Ohio 44514

Filer Status	[X] Member of the U.S House of Representatives	State: Ohio District: 17th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MAY -6 1991

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(Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Kenneth and Company	Spouse Salary	NA	
	Henri's Beauty Salon	Spouse Salary	NA	
	American Association of Physicians From India (April 21, 1990)	Speech	$ 500	
	American Arab Anti-Discrimination Committee (Mar 20, 1990)	Speech	$2,000	
	Canadian Charitable Committee (Feb. 23, 1990)	Speech	$2,000	
	Croation Congress (Jan. 12, 1990)	Speech	$2,000	
	Mr. Din Derti (Mar. 30, 1990)	Speech	$ 300	
	Europa Travel Service (Apr. 19,1990)	Speech	$2,000	
	Genc Realty Management (Mar. 30, 1990)	Speech	$ 300	
	Dr. Farouk A. Hamouda' May 18, 1990)	Speech	$1,000	

For additional earned income, use next page

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Reporting Individual's Name
James A. Traficant, Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Mosque Foundation of Chicago (May 18, 1990)	Speech	$1,000	
Old Timers Defense Fund (June 29, 1990)	Speech	$2,000	
Friends of Arthur Rudolph (May 27, 1990)	Speech	$2,000	
William Thomas (Mar 30, 1990)	Speech	$ 900	
Unchain (September 7, 1990) Philadelphia , PA	Speech	$1,000	
Unchain (Spetmeber 8, 1990) Newark, NJ & New York, NY	Speech	$2,000	

Reporting Individual's Name

James A. Traficant, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT Examples: S	ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Aceto Corporation Stock	X									X							X									
	Congressional Federal Credit Union		X										X					X									
S	Lot #424 Matthews Rd,Boardman, Ohio			X							NONE							X	NONE								

For additional assets and unearned income, use next page

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Reporting Individual's Name
James A. Traficant, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
S	Internal Revenue Services	Tax payment				X			
S	Congressional Federal Credit Union	Automobile loan	X						

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Reporting Individual's Name
James A. Traficant, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Croation Congress		1/13-14/90	Roundtrip Air/Pitts,to Harrford,CT, 1 night lodging & food	
AmericanArab Anti Discrim. Committee		2/17-18/90	Roundtrip Air/Pitts to Cincinnati,OH, 1 night lodging & food	
University of North Texas		2/19/90	Roundtrip Air/Pitts to Ft. Worth, TX, lunch	
Canadian Charitable Committee		2/23-23/90	Air Wash.DC to Toronto to Pitts., 1 night lodging & food	
Phil Donahue Show		3/4-5/90	Air Pitts, to Laguardia to Washington DC, 1 night lodging & food	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

PART VII--"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION., LODGING, FOOD, ENTERTAINMENT

SOURCE	DATES	BRIEF DESCRIPTION	GIFT
American Arab Anti Discrim. Committee	3/10-11/90	Roundtrip Air/Pitts to Philadelphia, 1 night Lodging & food	
Walter Erdell	3/29-4/2/90	Roundtrip Air/Wash. DC to Newark, N.J.	X
Friends of Arthur Rudolph	5/10-13/90	AirPitts to Chicago to Huntsville, Ala. to Chicago to Pitts. , 3 nights lodging & food	
American Arab Anti Discrim. Committee	5/17-18/90	Air/ Wash.DC to Chicago to Pitts, 1 night lodging & food	
National Federation of Housing Counselors	6/17-18/90	Air/Pitts to St. Louis to Las Vagas to St. Louis to Wash. DC, 1 night lodging & food	
UNCHAIN	9/7-9/90	Air/Pitts to Philadelphia, New York to Pitts., 2 nights lodging and food	
Phil Donahue Show	10/8/90	Roundtrip Air/ Washington DC to Youngstown, OH.	

Reporting Individual's Name
James A. Traficant, Jr.

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Northeast Ohio Energy Research & Redevelopment, Inc,

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE ☒

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James A. Traficant, Jr., M.C., Ohio-17th	5-3-91

Rec 27-Dec

5-3-91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:16
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Jerome Bob Traxler
(Full Name)

2366 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District: 8th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

mc (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Jacobs Engineering (January 2, 1990)	Honorarium - Speech	$2,000.00	
	TRW (January 9, 1990)	Honorarium - Speech	2,000.00	
	Rockwell International (January 10, 1990)	Honorarium - Speech	2,000.00	
	National Association of Homebuilders (January 15, 1990)	Honorarium - Speech	2,000.00	
	American Consulting Engineers Council (February 5, 1990)	Honorarium - Speech	2,000.00	
	Mortgage Bankers Association of America (Feb. 26, 1990)	Honorarium - Speech	1,000.00	
	Siemens Automotive (February 27, 1990)	Honorarium - Speech	1,500.00	
	University of Michigan Medical School (March 19, 1990)	Honorarium - Speech	2,000.00	
	National Association of Realtors (April 21, 1990)	Honorarium - Speech	2,000.00	
	Ocean Spray Cranberries, Inc. (April 25, 1990)	Honorarium - Speech	2,000.00	

For additional earned income, use next page

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Reporting Individual's Name

Jerome Bob Traxler

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Rural Water Association (May 5, 1990)	Honorarium - Speech	$2,000.00	
National Utility Contractors Association (May 16, 1990)	Honorarium - Speech	2,000.00	
Orbital Sciences Corporation (September 17, 1990)	Honorarium - Speech	2,000.00	
The Upjohn Company (December 5, 1990)	Honorarium - Speech	2,000.00	

Reporting Individual's Name

Jerome Bob Traxler

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Unimproved Lot, Woodbluff Subdivision, Mackinac Island, Michigan			X																							
	Saginaw Postal Federal Credit Union	X											X					X									
	Wright Patman Congressional Credit U.	X											X					X									
	Vanguard Fiduciary Trust Company - IRA		X								A			B					A B								
	Michigan Legislative Retirement System			X																							

For additional assets and unearned income, use next page

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Reporting Individual's Name

Jerome Bob Traxler

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
-	Edgar, Jane, & Dan Dewey 2511 Judah Road, Pontiac, Michigan 48055	Land Contract on Mackinac property	X						

4525

Reporting Individual's Name
Jerome Bob Traxler

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

[1]**Note:** House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Jacobs Engineering (speech & fact finding)		Dec.30 '89 - 1/2/90	Airfare, Saginaw, Mi, to Los Angeles, Ca., to Miami, Florida 3 days food & lodging (one day at personal expense)	
TRW (Speech & fact finding)		1/7-8/90	food & lodging, ground transportation - Downey, California	
Rockwell International (Speech & fact finding)		1/9-11/90	food & lodging, ground transportation - Redondo Beach, CA	
Miamia Congressional Workshop (legislative seminar)		1/11-14/90	3 days food & lodging, ground transportation - Miami, Florida, (one day at personal expense)	
National Association of Homebuild. (speech - executive committee)		1/15-16/90	Airfare, Miami, Florida to Atlanta, Georgia, to Washington. 2 days food & lodging, ground transportation	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4526

Reporting Individual's Name
Jerome Bob Traxler

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C app. 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Bob Traxler	5-15-91

GPO 1991 37-598 (n)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

(12)

MAY 15 1991

MC

(Office Use Only)

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 MAY 20 AM 7:50
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Morris King Udall
(Full Name)

1812 South 24th Street
(Mailing Address)

Arlington, VA 22202

Filer Status	[X] Member of the U.S. House of Representatives	State: Arizona District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	American Honey Producers (March 31, 1990)	Speech	$1,000	
	ICH (May 8, 1990)	Book Royalties	$2,423	
	West Publishing (August 31, 1990)	Book Royalties	$ 396	
	Government of the District of Columbia	Spouse Salary	$3,113	

For additional earned income, use next page

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Morris K. Udall

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	2.77% interest in Kingmann Station Limited Partnership, an Arizona residential partnership			X													Return of capital			X							
JT	0.82% interest in Alexandrite Sands Limited Partnership, an Arizona residential partnership			X										X				X									
	31.59% interest in Lawyers Title Trust 7431, an Arizona land trust					X								X				X									
	24.13% interest in West Ina Business Park, an Arizona partnership, rental real estate	X												X				X									
	US Treasury Notes				X								X								X						
S	US Treasury Note			X									X								X						

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Morris K. Udall

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Valley National Bank		X										X					X									
	Valley National Bank	X											X					X									
	Perpetual Savings Bank		X										X					X									
S	Congressional Federal Credit Union		X										X					X									
	Ahmanson H F & Co., 700 shares		X								X								X								
	City National Corp., 700 shares		X								X								X								
	Coastal Corp., 300 shares		X								X								X								
	Du Pont, 300 shares		X								X								X								
	Ingersoll Rand, 300 shares		X								X								X								
	Limited Inc., 700 shares		X								X								X								
	Midwest Resources Inc., 540 shares		X								X								X								
	NWNL Co., Inc. 600 shares		X								X								X								
	Perpetual Fin CP, 1,330 shares		X								X								X								
	Puget Sound Power, 500 shares		X								X								X								

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Morris K. Udall

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Dean Witter/Sears Liquid Asset		X								X								X							
	Airpark Corp., 1 share	X									X							X								
	Dean Witter, IRA		X								X		X						X							
S	Ahmanson H F & Company, 600 shares		X								X								X							
S	Coastal Corp., 300 shares		X								X								X							
S	Coca Cola Co., 100 shares		X								X								X							
S	Du Pont, 50 shares		X								X								X							
S	Merck & Co., 100 shares		X								X								X							
S	Minnesota MNG Mfg., 100 shares		X								X								X							
S	Mobil, 200 shares		X								X								X							
S	National Medical Enter, Inc., 260 shares		X								X								X							
S	Pacific Telesis Group, 30 shares		X								X								X							
S	Sears Roebuck & Co., 400 shares		X								X								X							
S	Sun Micro Systems, 500 shares		X								X								X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Morris K. Udall

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Dean Witter Liquid Asset		X								X								X								
S	Dean Witter, IRA				X						X		X								X						
JT	Personal residence, Arlington, VA						X							X				X									
	28 acres unimproved land, Fort Royal			X										X				X									
	8 acre tract, La Cholla Airpark, Tucson, AZ			X										X				X									
	1/2 interest in 40 acres of unimproved land																										
	near Red Rock, Pinal County, AZ			X										X				X									
	1/3 interest in 7 acres located at Section 21,																										
	T13s, R13 (Tanque Verde Valley), Pima																										
	County, AZ		X											X				X									
	1/5 interest in 5 3/4 acres located on 22nd																										
	Street at Camino Seco, Pima County, AZ				X									X				X									
S	Land in Los Angeles County, CA		X											X				X									
	2.89% interest in Casino Lights Limited																										
	Partnership, an Arizona land partnership			X										X				X									

Reporting Individual's Name

Morris K. Udall

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	AHMANSON H F & CO., 400 shares	X			4/26	X						
	" 500 shares	X			6/27	X						
S	" 100 shares	X			6/27	X						
	" 100 shares	X			8/29	X						
	" 100 shares	X			10/01	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	Fleet Mortgage, personal residence	Mortgage			X				
	1/3 interest in deed of trust to IDQ, Inc.	Mortgage							
	1/5 interest in note to Camino Seco & 22nd 7212 Partnership	Mortgage			X				
	31.59% interest in note to Spanish Trail Vista, an								
	Arizona partnership	Mortgage				X			

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Morris K. Udall

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	AHMANSONH F & CO., 100 shares	X			11/28	X						
S	CITY NATIONAL CORP., 300 shares	X			4/26	X						
S	" 100 shares	X			6/06	X						
	" 500 shares	X			6/27	X						
S	" 100 shares	X			6/27	X						
	" 100 shares	X			7/06	X						
	" 100 shares	X			8/29	X						
S	COASTAL CORP., 250 shares	X			6/12	X						
	" 300 shares	X			6/27	X						
S	" 50 shares	X			6/27	X						
S	COCA COLA CO., 100 shares	X			4/26	X						
S	DU PONT, 250 shares	X			6/12	X						
	" 250 shares	X			6/27	X						
S	" 50 shares	X			6/27	X						
	" 50 shares	X			7/06	X						

Morris K. Udall

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	IDAHO POWER CO., 440 shares	X			6/27	X						
	INGERSOLL RAND, 200 shares	X			6/27	X						
	" 100 shares	X			8/29	X						
	LIMITED INC., 400 shares	X			6/27	X						
	" 200 shares	X			8/29	X						
	" 100 shares	X			10/01	X						
S	MERCK & CO., 100 shares	X			6/12	X						
	MIDWEST RESOURCES, 540 shares	X			6/27	X						
S	MINNESOTA MNG. MFG., 100 shares	X			4/26	X						
S	MOBIL, 200 shares	X			9/25	X						
S	NWNL CO., 250 shares	X			4/26	X						
S	" 50 shares	X			6/12	X						
	" 300 shares	X			6/27	X						
	" 100 shares	X			7/06	X						
	" 100 shares	X			8/29	X						

Morris K. Udall

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	NWNL CO., 100 shares	X			10/01	X						
S	PACIFIC TELESIS GROUP, 30 shares	X			6/12	X						
	PUGET SOUND POWER, 500 shares	X			6/27	X						
S	SEARS, 200 shares	X			4/26	X						
S	" 100 shares	X			6/27	X						
S	" 100 shares	X			10/24	X						
S	SUN MICRO SYSTEMS, 300 shares	X			6/12	X						
S	" 200 shares	X			9/25	X						
S	DEAN WITTER GROWTH FUND	X			1/23		X					
	TREASURY NOTES	X			7/06			X				
S	DEAN WITTER GROWTH FUND	X			2/28	X						
S	TREASURY NOTES	X			9/25		X					
	FIDELITY TREND FUND, 898 shares		X		6/15		X					
	IDAHO POWER CO., 400 shares		X		8/29	X						
	MASS. INVESTOR GROWTH STOCK FUND, 4,174 shares		X		6/15		X					

Morris K. Udall

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	CITY NATIONAL CORP., 500 shares		X		9/25	X						
	SLH ARIZONA MUNICIPAL FUND, 3,287 shares		X		6/07		X					
S	NNML COMPANIES, 300 shares		X		9/25	X						
	1300 CRYSTAL DRIVE, CONDOMINIUM		X		3/30					X		
S	DEAN WITTER GROWTH FUND		X		6/06		X					

Reporting Individual's Name
Morris K. Udall

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18. **NONE** [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22. **NONE** [x]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name

Morris K. Udall

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Morris King Udall (by Norma J. Udall)	May 15, 1991

GPO: 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 5:27

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Jolene Unsoeld
(Full Name)

1508 Longworth
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: WA District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
Jolene Unsoeld

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																		Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
	WA. State Employees Credit Union PO Box WSECU; Olympia, WA 98507				X										X						X								
	TIAA/CREF 730 Third Ave., NY, NY 10017						X								X								X						
	Signet Bank - PO Box 25339 Richmond, VA 23260				X										X					X									
	Exxon PO Box 3981; Church Sta., NY 10008						X						X										X						
	Pension (Death Benefit - State of WA) Olympia, WA 98504											monthly payment							pension					X					
	25% undivided interest in family property on Evergreen Hwy, Vancouver, WA							X											none										one-time gift transfer from father

For additional assets and unearned income, use next page

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Reporting Individual's Name
Jolene Unsoeld

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-90			X				
	25% undivided interest of family property given by father Lots 3,5 & 6 + tidelands, Sub. Div Taylor DLC	Gift			12-31-90				X			

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Security Pacific Bank (Olympia Branch) Olympia, WA	personal loan for campaign		X					
	Thurston County - Heritage Federal Savings Olympia, WA 98501	Mortgage on 6110 Buckthorn NW	X						

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Reporting Individual's Name
Jolene Unsoeld

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
See Attached			

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Whitman College - class lecture Walla Walla, WA 99302		Nov. 26, 1990	Roundtrip auto and air to Walla Walla reimbursement	
Wash. State AFL/CIO - talk state convention		June 8 & 9	Roundtrip air & overnight Seattle to Spokane - return	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

1990 Gift List

Elliott S. Hall, VP-Wa. Staff Gov. Relations
Ford Motor Co.
1350 I St., NW
Washington, DC 20005
Book: Hard Runners, ($18.95)

Frances W. Preston
President and CEO, BMI
900 Evarts St NE
Washington, DC 20017
3 CD set/book ($30)

Simon Siegel, Ex. Director
WA Wine Institute
1932 1st Ave Rm 510
Seattle WA 98101
6 bottles Washington wine ($50)

Bob Lange
Boeing Corporation
1700 N. Moore St.
Rosslyn, VA 22209 (558-9664)
T-Shirt, "Till rotor" Technology ($10)

David Gogul (Goodwill Games)
Sagamore Assoc.
1701 K Street NW, Suite 400
Washington, DC 20006
Nylon "Goodwill Games Staff" jacket ($40)

Spanierman Gallery
50 E 78th St.
NY, NY 10021 (212-879-7085)
"The Spencer Collection of American Art" Catalog ($5)

Service Emp. Union
1313 L St. NW
Washington, DC 20005
surgical shirt ($5)

Bill Larson, President, Bill Larson & Assoc. Inc.
1119 A St
PO Box 1194
Tacoma, WA 98401 (206-383-4444)
vinyl notepad holder, luggage tags (plastic/brass) ($10)

Julie Peterson
Comp. Health Ed. Foundation
22323 Pacific Hwy S.
Seattle, WA 98198
2 "Here's Looking at You 2000" sweathshirts ($30)

Doug North, Mountaineers
306 2nd Ave West
Seattle, WA 98119
Book: Washington's Wild Rivers: The Unfinished Work ($35)

1990 Gift List, p.2

Rita Hagen
Minn. Comm. Action Assn.
1821 University Ave. South, Suite 281
St. Paul MN 55104 (612-645-4159)
gift pack ($15)

General Motors
1660 L St. NW
Washington DC 20036;
Assn. for Public Broadcasting
1350 Conn. Ave
Washington, DC 20036
Civil War documentary videotapes ($200 est.)

AVIA
16160 SW Upper Boones
Ferry Rd 97224
Portland, OR 97224
Running shoes ($50)

Whitman Corporation
Gary A. Lee, Vice President-Governmental Affairs
1667 K St NW
Washington, DC
Assorted Chocolates ($20)

Tilton Valley Trees
118 Dodge Rd.
Morton, WA 98356 (206)496-5659
Tree ($60)

RJR
1455 Penn Ave, NW Suite 525
Washington, DC 20004
2 crates full of food items ($50)

Tom Lewis, T & M Ranch, Angels of the World
P.O. Box 1122
Jupiter, FL 33468
Angel ornament ($5)

Bob Carson, Carson Arboretum
Whitman College
Walla Walla, WA 99362
Book: Ariadne's Thread ($20)

Bob Carson, Ted Stein, Deborah & John DuNann Winter
Whitman College
Walla Walla, WA 99362
Whitman sweatshirt ($15)

Preston Gates Ellis & Rouvelas Meeds
Suite 500
1735 New York Ave, NW
Washington, DC 20006
Pacific Northwest Preserves (2 sets) ($25)

1990 Gift List, p. 3

Frederick S. Benson, III
Weyerhauser (Vice President)
2001 L Street N.W., Suite 304
Washington, D.C. 20036
Christmas wreath ($20)

Barbara Morris Lent, NYNEX
1828 L St. NW
Washington, DC 20036
Jewelry box ($20)

Weyerhauser Company
2001 L Street N.W.
Suite 304
Washington, D.C. 20036
Smoked Salmon Filet ($30)

Bernard F. Brennan, Chairman & CEO
Montgomery Ward Corporate Offices
Montgomery Ward Plaza
Chicago, Ill. 60671
leather-bound Rudolph the Red-Nosed Reindeer ($25)

Burlington Northern Railroad
50 F Street, N.W.
Washington, D.C. 20001
Wild Rice and Walnuts ($15)

Continental Baking Company, Ralston Purina
via Hon. William L. Clay
Ralston Purina
1350 Eye St. NW, Suite 840
Washington, DC 20005
Fruit cake ($20)

Associated Milk Producers, Inc.
Sam Stone
P.O. Box 790287
San Antonio, TX 78279
Box of cheeses ($25)

Paralyzed Veterans of America
801 18th St., N.W.
Washington, D.C. 20006
Fred Cowell, Nat'l Advocacy Director
Pistachios ($10)

John Cady, Pres. & Juanita Duggan, VP Gov't Affairs
National Food Processors Assn
1401 New York Ave NW Suite 400
Washington, DC 20005
Tote bag with food items ($25)

Reporting Individual's Name
Jolene Unsoeld

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [ ] NA [X]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [ ] NA [X]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jolene Unsoeld	May 15, 1991

GPO 1991 [illegible] (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 PM 5:09

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

FREDERICK Stephen Upton
(Full Name)

P.O. Box 900
(Mailing Address)

ST. Joseph, Michigan 49085

Filer Status	☒ Member of the U.S. House of Representatives — State: Michigan District: 4th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

MC (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☑

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name: Fred Upton (2)

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	162 Main Street, Dover, Delaware				X							X								X							
S	American Capital Convertible Securities (IRA)		X								X								X								
JT	American Information Technologies Corp. *			X							X								X								
JT	American Telephone & Telegraph *			X							X								X								
S	GM-H		X								X							X									
S	UpJohn		X															X									
S	Warner-Lambert		X															X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Fred Upton (3)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Schlumberger		X								X								X							
	Scops		X								X								X							
	Shoreline Financial				X						X										X					
	Stuart Hall		X								X							X								
	USX		X								X								X							
JT (not S) DC	Whirlpool							X			X											X				
	Bell South *		X								X								X							
	Bell Atlantic *		X								X								X							
	Wrigley *							X			X										X					
	Amoco *			X							X								X							
	Pfizer *			X							X								X							
	IBM *			X							X								X							
	Massachusetts Inv. Trust		X								X			X						X						
	Massachusetts Inv. Growth Stock		X								X			X					X							
JT	Renaissance Assets Trust			X							X									X						

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton (4)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Chemical Banking (IRA)			X								X								X								
Southern Company (IRA)			X								X								X								
AMP			X								X								X								
Baker-Hughes			X								X							X									
Walt Disney				X							X								X								
Englehard Corp			X								X							X									
Federal National Mortgage Ass.			X								X							X									
Gannett			X								X								X								
General Electric			X								X								X								
Hasbro			X								X							X									
Hechinger Class B			X								X							X									
Pacificorp				X							X									X							
Pepsico						X					X									X							
Pinnacle Financial			X								X								X								
Solomon			X								X								X								

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton (5)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Viol trusts - stocks not combined with																										
Exxon			X																							
NyNex			X																							
Pactel			X																							
Quaker Oats			X																							
S. Western Bell			X																							
U.S. West			X																							
Kimberly Clark			X																							
American Express			X																							
Capital Holding Comp			X																							
J.C. Penny			X																							
Cash/Mmkt				X																						
U.S. Treas. Bonds			X																							
Total income from Trust Acct.											X												X			
Steve Upton Trust (whirlpool/Stock/cash)						X					X										X					
People State Bank Savings Acct			X								X								X							

Reporting Individual's Name: Upton (6)

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	WGOR Radio		X															None								
	USUPS (oil)		X															None								
	State Monstec Oil Well		X														oil revenue			X						
	Bullis Oil well		X														oil revenue				X					
	N. Antrim well		X														oil revenue				X					
	Colorado wells	See transactions															oil revenue		X							
	Lakeview School Bonds	See transactions											X						X							
DC	Federated U.S. Gov Fund (Trust Acct)		X																							
	"Value" is combined value of individual holdings as well as Viol trust holdings. Dividends listed are individual holdings only — dividends from Viol trust are listed in "Total income from trust Accounts."																									

Reporting Individual's Name: Upton (7)

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	AT&T stock	X			11-28-90	X						
S	Warner Lambert stock	X			11-28-90	X						
S	Upjohn Stock	X			11-28-90	X						
	Lakeview Michigan School Bonds		X		4-2-90	X						
	WGOR-FM -	X			{9-29-90 5-7-90}	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

4554

Reporting Individual's Name: Upton (8)

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Wolverine Exploration (Elmer oil well)		X		2-27-90		X					
	Wolverine Exploration (Bell oil well)		X		2-27-90	X						
	Wolverine Exploration (Colorado wells)		X		12-1-90	(Less than $1000)						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☑

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name: Upton

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Public Broadcasting System	Civil War video tapes	$120—

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Miami Congressional Workshop on Political Economic & Security issues in the W. Hemis.		1/12–1/14 '90	2 nights Food & lodging – self & spouse Air travel From D.C. → Miami → S. Bend / Spouse return D.C. → Miami	
Congressional Charity Tennis Tournament		3/2–3/4 '90	Roundtrip bus travel with the spouse from D.C & 2 nights lodging in White Sulphur Springs, W.VA. with Food	
Congressional Institute		12/1–12/2 '90	100th Class retreat w/spouse 1 night lodging & Food – St. Michaels, MD	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Upton (10)

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
General Partner	Wolverine Oil (N. Antrim well)
Limited Partner	WGOR-FM
Co-Partner	USUPS (oil & gold)

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☑

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[signature]	5-15-91

(1)

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1991 JUL -3 PM 3:21
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC

FRED UPTON
4TH DISTRICT, MICHIGAN

June 28, 1991

JUN 29 1991

Honorable Donn Anderson
Clerk of The House

Dear Donn -

I would like to amend my Financial Disclosure Statement for calendar year 1990 by adding the following under Part II and III (assets and unearned income):

Block A	cat. of value	Type	Amt of income
Seligman Fund	"C"	Dividend	III
LEF & MKT.	"B"	Dividend	III

Please contact me if you have questions or need further information.

Sincerely,

Fred Upton

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

ITIMOUS THADDEUS VALENTINE, JR.
(Full Name)

P. O. BOX 727, NASHVILLE, N. C. 27856
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: N. C. District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Tobacco Institute, Wash.,D.C. (Jan. 8, 1990)	Speech	$2,000	
	Association of American Railroads, Wash., D.C. (April 20, 1990)	Speech	$1,000	
	Council of Scientific Society Presidents, Wash.,D.C. (May 11, 1990)	Speech	$ 250	
	American Society of Civil Engineers, Wash.,D.C. (June 4, 1990)	Speech	$1,000	
	Harris Corporation, Alexandria, VA (June 20, 1990)	Speech	$1,000	
	Board of Trade of the City of Chicago, Chicago, ILL. (July 5, 1990)	Speech	$ 750	
	Chicago Mercantile Exchange, Chicago, ILL. (July 5, 1990)	Speech	$ 750	
	Phillip Morris Management Corp., New York, NY (July 19, 1990)	Speech	$2,000	
	RJR Nabisco Washington, Inc., Wilkes-Barre, PA (July 30, 1990)	Speech	$2,000	
	Convex Computer Corporation, Richardson, TX (Oct. 28, 1990)	Speech	$2,000	

For additional earned income, use next page

4559

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Quantum Research, University of TN (Dec. 27, 1990)	Speech	$2,000	
Music Teaching - Spouse	Music Services	NA	

Reporting Individual's Name

Itimous Thaddeus Valentine, Jr.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Citizens Savings & Loan IRA-CD			X									X							X							
	Citizens Savings & Loan Stock	X																									
	Unity Bank Stock			X									X					X									X
	Granville United Bank Stock		X																								
	Precious Metal Investment		X																								
	Vale Properties Stock (Sub S Corp)				X												Corporate Sub S Income			X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Itimous Thaddeus Valentine, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Federal Land Bank Stock		X																							
S	IBM Corp. Stock		X								X							X								
S	Eastman Kodak Stock		X								X								X							
S	Merrill Lynch New Econ Fund		X											X					X							
S	Merrill Lynch CBA Fund		X								X								X							
S	North Carolina Municipal Power Bonds		X										X						X							
S	Merrill Lynch CIF 251 STMPS Fund			X									X								X					
S	Merrill Lynch Flagshp NC Fund		X																							
S	North Carolina Eastern Power Bonds		X										X						X							
	Roses Corporation Stock		X								X								X							X
	Vacant Lot-Fort St., Nashville, NC		X																							
	Nash County Farm (Nash County, NC)				X									X							X					
	Drug Store (1/2 Int.) 219 W. Washington Nashville, NC			X								X								X	X (NET)	X(GROSS)				
	Two Vacant Lots-Simayln St., Nashville N.C.			X																						
	Citizens Savings & Loan - IRA																Pension Distribution					X				X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Itimous Thaddeus Valentine, Jr.

BLOCK A Asset and/or income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	State Employees Credit Union Savings		X										X						X								
	Citizens Savings & Lnan Savings	X											X					X									
	Centura Bank Checking		X										X					X									
	Unity Bank Checking		X										X					X									
JT	Great Mistakes Partnership Interest Wilmington																Partnership Income		X								X
S	N.C. Teachers Retirement																Pension	X									
	N. C. Legislative Retirement																Pension		X								

Reporting Individual's Name

Itimous Thaddeus Valentine, Jr.

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Unity Bank - Common Stock - Additional Shares	X			9-28-90	X						
	Roses Corporation - Common Stock - Additional Shares	X			10-4-90	X						
	Great Mistakes Partnership Interest - Wrightsville		X		12-31-90		X					
JT	Great Mistakes Partnership Interest - Wilmington		X		12-31-90		X					
	Citizens Savings & Loan - IRA Pension Distribution		X		4-11-90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Federal Land Bank, North Carolina	Mortgage on Farm Land (88.4 acre-Nash County, NC)		X					
	Don L. & Gerald A. Frazier (Individuals)	Mortgage on Farm Land (88.4 Acre-Nash County, NC)		X					

4564

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Tobacco Institute	Jan. 18-21, 1990	Roundtrip air from Wash.D.C. to Palm Springs, CA, 4 days food & lodging, self & spouse	
Association of American Railroads	April 6-8, 1990	Roundtrip air from Wash. DC to Key Largo, FLA., 3 days food & lodging, self and spouse	
Convex Computer Corporation	Oct. 28-29, 1990	Roundrip air from Wash. DC to Dallas, Texas	
Quantum Research	Nov. 14, 1990	Roundtrip air from Raleigh, NC to Atlanta, GA.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Limited Partner	Great Mistakes-Wilmington (Limited Partnership)
Limited Partner	Great Mistakes-Wrightsville (Limited Partnership)

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[illegible]	[illegible]

GPO: 1991 37-506 (m)

1991 JUN 13 PM 2:54

Congressman Tim Valentine
House of Representatives
Washington, D.C. 20515

HAND DELIVERED

June 11, 1991

2

MC

The Honorable Donnald K. Anderson
Clerk of the House of Representatives
1036 Longworth House Office Building
Washington, D. C. 20515

Dear Sir:

In response to an inquiry from the Committee on Standards regarding my 1990 Financial Disclosure Statement, I submit this letter as an amendment to my 1990 Financial Disclosure Statement. I am submitting this letter instead of preparing an amended 1990 financial disclosure statement.

Of the items identified as apparently needing additional information, the following were identified as assets needing possible clarification:

Citizens Savings and Loan, IRA
North Carolina Teachers Retirement
North Carolina Legislative Retirement

All three of the above asset items should have been indicated as having a category of value of "none," which is Category A under Block B of the form. The Citizens Savings and Loan - IRA item was no longer held at the end of 1990 and consequently had no value at that time. The North Carolina Teachers Retirement that my wife received was completely from state funds. Any contribution made by her had previously been refunded. Consequently, she has no vested value in the retirement at the end of 1990. The North Carolina Legislative Retirement was a pension I received for which I have made no personal contributions.

Not printed at government expense

Other items that were identified as possibly needing clarification were items of Unearned Income. These items include the following:

Granville United Bank stock
Precious Metals Investment
Citizens Savings and Loan Stock
Federal Land Bank Stock
Merrill Lynch Flagship N.C. Fund

All of the above Unearned Income items, except the Merrill Lynch Flagship N.C. Fund, were investments being held that yielded no income in 1990. The Merrill Lynch Flagship N.C. Fund that my wife holds should have been classified as a dividend type of income with a Category amount of II under Block C of the form. All other Unearned Income items should have been indicated as Category I under Block C of the form. All other Unearned Income items should have been indicated as Category I under Block C of the form to indicate income as being "none."

I trust that this letter of explanation is satisfactory for the inquiries of the Committee on Standards. If you determine that an amended 1990 financial disclosure would be helpful, please let me know. Thank you for your attention.

Cordially,

Tim Valentine

TV/pal

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A For use by Members, officers, and employees

1991 MAY 15 PM 9:36

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

GUY VANDER JAGT
(Full Name)

2409 RAYBURN HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON, D. C. 20515

Filer Status	[XX] Member of the U.S. House of Representatives — State: Michigan, District: 9th	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Nat'l Assn. of Home Builders (1/29/90) Atlanta, Georgia	Speech	$2,000	
	Nat'l Assn. of Wholesaler Distributors (2/23/90) D.C.	Speech	$2,000	
	District 2 - Marine Engineer's Beneficial Assn. (3/9/90) - Dania, Florida	Speech	$2,000	
	(Organization Management, Inc.) - Washington Non-Profit Tax Conference - 3/9/90) - D. C.	Speech	$2,000	
	Securities Industry Association (3/28/90) San Juan, P.R.	Speech	$2,000	
	Computer Dealers and Lessors Assn. (4/10/90)Westfield, VA	Speech	$2,000	
	Michigan Beer and Wine Wholesalers (4/10/90) Naples, Florida	Speech	$1,500	
	New York Times (Article)(January 1990)	Article	$150	
	American Bakers Assn. (4/13/90) - Naples, Florida	Speech	$2,000	
	U.S. Tobacco Company (5/15/90) - Palm Beach, Florida	Speech	$2,000	

For additional earned income, use next page

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Reporting Individual's Name
GUY VANDER JAGT

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Michigan Rural Electric Cooperatives (4/13/90) Lansing, MI	Speech	$1,000	
Targeted Job Tax Credit Consultants (6/22/90) D. C.	Speech	$2,000	
Mutual Life Insurance Legislative Committee (7/2/90) D. C.	Speech	$2,000	
Johnson Industries, Inc. (7/11/90) Jupiter, Florida	Speech	$2,000	
National Association of Real Estate Investment Trusts (7/20/90) D. C.	Speech	$2,000	
Delta Dental Plans Assn. of America - (8/22/90) Traverse City, MI (Total payment from Delta Dental	Speech	$200	(To reach maximum allowable Honoraria)
$2,000. -- kept $200 Honorarium and $1,800 donated to Charity)			
Delta Dental Plans Assn. of America (8/22/90) Traverse City, MI	Speech	$1,800	X
National Assn. of Letter Carriers (9/6/90) New Orelans, LA	Speech	$2,000	X
National Fraternal Congress of America (10/22/90) Seattle, Washington	Speech	$2,000	X
National Electrical Contractors Assn. (11/16/90) - D. C.	Speech	$2,000	X
(11/16/90) - D. C. Air Conditioning and Refrigeration Wholesalers Assn.	Speech	$2,000	X
Smokeless Tobacco Council, Inc. (11/27/90) Tampa, Florida	Speech	$2,000	X
Texas Cattle Feeders Assn. (12/28/90) Fort Worth, Texas	Speech	$2,000	X
Recreation Vehicle Dealers Assn. (12/28/90) Las Vegas, Nevada	Speech	$2,000	X
National Automobile Dealers Assn. (10/6/90) D. C.	Speech	$2000	X

Reporting Individual's Name
GUY VANDER JAGT

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Lake Osceola State Bank (Savings)		X										X					X									
	Old Kent Bank of Cadillac Cadillac, MI (Checking)	X											X					X									
	Old Kent Bank of Cadillac Cadillac, MI (Savings)		X										X						X								
	Crestar Bank Great Falls, Virginia (Savings)		X										X						X								
	Crestar Bank Great Falls, Virginia (Savings)		X										X						X								
	Equitable Life Insurance (Interest on Paid Life Ins. Policy)	X											X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
GUY VANDER JAGT

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Franklin Life (Interest on Paid Life Insurance Policy)	X											X						X								
	R. Vanderlind and Son (Promissory Note)		X										X						X								
	Carolyn Daughtry (Interest on Personal Loan)	X											X					X									
	Real Property - House at 615 Selma St., Cadillac, MI (Rental Property)		X									X						X									
	Marriott Residence Inn II, Md. (Motel) Limited Partnership			X							X									X							
	Fairfield Inn by Marriott (Motel) Limited Partnership			X							X								X								
	Conoco, Inc. (Was Wild Lands; Wildlands sold to Miller Oil; Oil Miller sold to Conoco, Inc.) (NAME CHANGES ONLY)			X									X					X									
	Donald Peterson Land Contract (Holding Company)			X									X								X						
	Great Lakes Chemical (Stock)				X						X								X								
	Kysor Industrial (Stock)		X								X								X								
	Merrill Lynch Blueprint (Stock)	X									X																X
	Merrill Lynch Cash Management (Stock)				X						X											X					
	Merrill Lynch Cash-Capital Fund (Stock)				X						X											X					

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: GUY VANDER JAGT

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Tri-Continental Corp (Stock)		X								X									X							
	Dominick and Dominick (Management Brokers for Municipal Bonds) Municipal Bonds: Wayne County, MI		X										X						X								
	MONY Capitol Retirement Plan (each year plan invests in different investments - in 1989 - Lifetime Dividends Trust; in 1990 - Liquid Green Trust)				X						X													(No income until Retirement)			
	First America Bank, Manistee, MI Savings		X										X					X									

Financial Disclosure A2(b)

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Reporting Individual's Name

Guy Vander Jagt

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Merrill Lynch Blueprint Program American Home Products - Sold Shares		X		5/30/90		X					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [XXX]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name

Guy Vander Jagt

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corporation	Civil War Video Tapes	$120.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
National Assn. of Homebuilders	Jan 19,'90	One way Air from Wash. DC to Atlanta, Ga., 1 day food and lodging Self and Spouse	
Hundred Club, Monroe Co. Marathon Key, Florida	Feb. 2-4, 1990	Marathon Key, Florida Roundtrip Air, Wash. D.C. to Fla., 3 days food & lodging Self and Spouse	
Consumers Power	Feb. 1, 1990	Roundtrip Air, Wash. D.C. to Michigan, 1 day food and lodging Self	
The Congressional Institute	Feb. 22-24, 1990	Roundtrip Air, Wash. D.C. to New Jersey, 3 days food and lodging Princeton, N.J. Self and Spouse	
Marine Engineer's Beneficial Assn.	March 2, 1990	Roundtrip Air, Wash. D.C. to Florida, 1 day food and lodging Dania	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

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Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

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NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Michigan Beer and Wine Wholesalers		March 16-17, 1990	Roundtrip Air from Wash. D.C. to Florida, 2 days food and lodging Naples, Fla. Self	
Citibank		March 17-19, 1990	Roundtrip Air from Wash. D.C. to Puerto Rico, 3 days food and Lodging - Self San Juan	
American Bakers Association		March 25-26, 1990	Roundtrip Air from Wash. D.C. to Florida, 2 days food and lodging - Self	
Michigan Rural Electric Cooperative		April 2, 1990	Round trip Air from Wash. D.C. - Self to Lansing, Michigan	
Residential Resorts		April 28-30, 1990	Roundtrip Air from Wash. D.C. to Nevada, 3 days food and lodging Las Vegas, Nevada	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name: Guy Vander Jagt

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE XXX

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE XXX

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [XXX] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [XXX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 PM 2:39
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

BRUCE F. VENTO
(Full Name)

2304 RHOB WDC 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: MN District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
JAN 30	AMERICAN LAND TITLE ASSOC WDC	SPEECH	1000.00	
FEB 2	NATIONAL ASSOCIATION REALTORS LA. CALIF	"	2000.00	
FEB 3	SALOMON BROTHERS INC PALM SPRINGS CALIF	"	2000.00	
FEB 20	AMER. INSTITUTE ARCHITECTS WDC	"	1000.00	
FEB 21	INTERNAT'L ASSOCIATION OF BRIDGE STRUC. AND ORNAMENTAL IRON WORKERS HOLLYWOOD FLA	"	2000.00	
MAR 7	U.S. LEAGUE OF SAVINGS INST. WDC	"	2000.00	
MAR 9	TEXAS S&L LEAGUE DALLAS, TX	"	2000.00	
MAR 13	CONF. OF NATIONAL PARK CONCESSIONAIRES WDC	"	1000.00	
MAR 24	FEDERATED INVESTORS MARCO ISLAND, FLA	"	2000.00	
MAR 26	THE WASHINGTON CAUCUS WDC	"	500.00	(250.00)

For additional earned income, use next page

Financial Disclo

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Reporting Individual's Name
BRUCE F VENTO

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
APR 4 FEDERAL NATIONAL MORG ASSOC. WDC	SPEECH	2000.00	
APR 18 COMMERCIAL-INVESTMENT REALESTATE COUNCIL WDC	SPEECH	1000.00	
APR 18 BANKING LAW INSTITUTE EXEC. INSTITUTE. INC. WDC	SPEECH	1000.00	
APR 25 SECURITIES IND. ASSOC. INC. WDC	SPEECH	2000.00	
MAY 7 EQUITABLE LIFE NY/NY	SPEECH	1500.00	
MAY 14 AI. CPA (CERT PUBLIC ACCT.) WDC	SPEECH	2000.00	
JUNE 4 PRUDENTIAL BACHE NY, NY	SPEECH	2000.00	
JUNE 4 TITLE ONE HOME IMPROVEMENT LENDERS ASSOC WDC	SPEECH	1000.00	X
JULY 25 NAT'L RURAL UTILITIES FINANCE COOP. WDC	SPEECH	1000.00	X
SEPT 6 MORTGAGE BANKERS ASSOC WDC	SPEECH	1000.00 1000.00	X X
SEPT 10 NATIONAL COUNCIL SAVINGS INST. WDC	SPEECH	2000.00	X
SEPT 10 NATIONAL ASSOC. OF REALTORS WDC	SPEECH	2000.00	X
SEPT 26 CENTURY 21 WDC	SPEECH	2000.00	X
MARY J VENTO (SPOUSE)	SELF EMPLOYED ARTIST MULTI MEDIA - VISUAL	NOT APPLICABLE	

Reporting Individual's Name
BRUCE F VENTO

PARTS II and III—ASSETS AND "UNEARNED" INCOME

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In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

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	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	162 Main Street, Dover, Delaware				X							X								X							
SPOUSE	WPCF CREDIT UNION ACCT.		X										X							X							
SPOUSE	AMERICAN SECURITY BANK WDC			X									X								X						
SPOUSE	JOHN G KINNARD & CO MPLS MN		X										X					X									
SPOUSE	RIGGS NAT'L BANK IRA ACCT.		X										X						X								
SPOUSE	RIGGS NAT'L BANK IRA ACCT.		X										X						X								
SELF	MINNESOTA RETIREMENT ANNUITY ACCT.			X						N.A.							N.A.										

For additional assets and unearned income, use next page

4580

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: BRUCE F. VENTO

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	MINNEAPOLIS TEACHER'S RETIREMENT ASSOCIATION			X						N.A							N.A.										

Reporting Individual's Name
BRUCE F VENTO

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
SELF	MINNESOTA PUBLIC MUNICIPAL BONDS (JOHN J KINNARD)	X			JUNE 27 '90	X						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☒

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name
BRUCE F. VENTO

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example:	Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
NATIONAL ASSOC. REALTORS		FEB 1-2	ONE WAY AIR TRAVEL WDC - LA CALIF. ONE NITE LODGING MEALS FOR SELF	
SOLOMON BROTHERS INC		FEB 3-4	ONE WAY AIR TRAVEL LA CALIF. - PALM SPRINGS CALIF. WDC. ONE NITE LODGING, MEALS FOR SELF	
NATIONAL ASSOC. IRON WORKERS		FEB 21-22	R.T. AIR TRAVEL WDC - HOLLYWOOD FLA. ONE NITE LODGING MEALS	
TEXAS S&L LEAGUE		MAR 9	R.T. WDC - DALLAS AIR TRAVEL MEAL - SELF	
FEDERATED INVESTORS		MAR 24	WDC - MARCO ISLAND FLA - MSP AIR TRAVEL ONE NITE LODGING MEALS, SELF	
EQUITABLE LIFE INS		MAY 7	R.T. WDC - NY, NY AIR TRAVEL MEAL - SELF	
PRUDENTIAL BACHE		JUNE 4	R.T. WDC NY, NY AIR TRAVEL MEAL SELF	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
BRUCE F. VENTO

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☒

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
SEPT 1976 -PRESENT	BRUCE F. VENTO AND MINNEAPOLIS SPECIAL SCHOOL DIST #1	LEAVE OF ABSENCE WITHOUT PAY

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Bruce F. Vento	MAY 13, 1991

GPO 1991 37-598 (m)

4584

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:20

HAND DELIVERED

MC

(Office Use Only) 7

Peter J. Visclosky
(Full Name)

330 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	X Member of the U.S. House of Representatives	State: Indiana District: 1st	Officer or Employee	Employing Office
Report Type	X Annual (May 15)	Amendment	Termination	Termination Date

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Electronic Industries Association (03-01-90)	Honoraria	$1,000.00	
	American Iron and Steel Institute (03-21-90)	Honoraria	$2,000.00	
	Coleman/Bartlett Washington Focus (03-20-90)	Honoraria	$2,000.00	
	Mitchell Hutchins (Paine Webber) (03-29-90)	Honoraria	$2,000.00	
	T.P.F. & C. (a Towers Perrin Company) (06-22-90)	Honoraria	$ 380.00	
	American Pension Conference (07-06-90)	Honoraria	$2,000.00	
	Edison Electric Institute (07-23-90)	Honoraria	$ 250.00	
	National Erectors Association (10-10-90)	Honoraria	$ 500.00	
	Fidelity Management Trust Company (11-02-90)	Honoraria	$2,000.00	
	Enterprise Communications, Inc. (11-16-90)	Honoraria	$1,000.00	

For additional earned income, use next page

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Reporting Individual's Name
Peter J. Visclosky

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Association of American Railroads (11-15-90)	Honoraria	$1,000.00	
Anne Marie O'Keefe (Spouse): All below.			
Prospect, National Cancer Institute Media Project (1-5-90, 2-7-90, 3-15-90, 6-3-90)	Earnings		
National Alliance for the Mentally Ill (1-8-90, 2-14-90, 3-26-90, 4-19-90, 5-30-90, 6-11-90,	Earnings		
7-20-90, 8-14-90, 9-8-90, 10-12-90, 12-15-90, 12-20-90)			
Advocacy Institute (Not Far Enough Consulting) (1-16-90, 2-1-90, 2-16-90, 3-1-90, 3-15-90, 4-3-90,	Fees		
4-15-90, 5-1-90, 5-15-90, 6-3-90, 6-18-90, 7-2-90, 7-16-90, 8-6-90, 8-16-90, 9-4-90, 9-25-90, 10-1-90,			
10-17-90, 11-5-90, 12-11-90)			
National Science Foundation (2-28-90)	Fees		
Advocacy Institute (COMMIT Boston) (9-4-90)	Fees		
Ted Klein and Company (Consulting) (11-5-90)	Fees		
International Business Machines (Panel with Michael Pertschuk) (11-7-90)	Speaking fee		
COMMIT Canada (Seminar) (11-16-90)	Speaking fee		
American Cancer Society (writing grant proposal) (11-17-90)	Grant writing fee		
Research Triangle Institute (COMMIT NC) (12-9-90)	Fees		
Advocacy Institute (NME Consulting) (12-18-90)	Fees		
Oregon Research Institute (Medford COMMIT) (12-20-90)	Fees		

Reporting Individual's Name
Peter J. Visclosky

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Merrill Lynch			X									X						X								
JT	Peoples Bank		X										X						X								
S	Madison National Bank		X										X					X									
S	Wright/Patman Congressional Federal Credit Union		X															X									
	Environ Joint Venture (property)		X														undeveloped property	X									
DC	John D. Visclosky Minority Trust		X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Peter J. Visclosky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	US Civil Service Federal Credit Union (Certificate of Deposit) IRA		X								X								X								
	Legg Mason Wood Walker Inc. IRA (Cash Reserve Trust)			X							X										X						

Reporting Individual's Name
Peter J. Visclosky

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
Peter J. Visclosky

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
General Motors	Video Cassette Tapes (PBS - Civil War Series)	$129.00
Indiana Public Broadcasting Stations	Video Cassette Tapes (PBS - Civil War Series)	$129.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Industrial Union Department, AFL-CIO	(01-04-90) (01-07-90)	Roundtrip Air from Wash. DC to Miami Beach, FL, 3 days lodging, food and transportation for self, spouse and child.	
International Business Machines Corp	(01-26-90)	Roundtrip AMTRAK from Wash. DC to New York, NY and lunch for self.	
Electroni Industries Association	(02-04-90) (02-05-90)	Roundtrip Air from Chicago, IL to Tampa, FL to DC, 1 night lodging, meals and transportation for self.	
American Pension Conference	(05-14-90)	Roundtrip AMTRAK from Wash. DC to New York, NY, and lunch for self.	
Association of American Railroads	(11-08-90) (11-11-90)	Roundtrip Air from Wash. DC to Jacksonville, FL, 3 days lodging, meals and transportation for self, spouse and two children.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C 7342)

Reporting Individual's Name
Peter J. Visclosky

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [ ]

Positions	Name of Organization
Trustee	Peter J. Visclosky Foundation, P.O. Box 10847, Merrillville, IN 46411
Settler	John Daniel Visclosky Minority Trust, P.O. Box 10847, Merrillville, IN 46411

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S.C. app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 15, 1991

GPO 1991 37 598 (m)

PETER J. VISCLOSKY
1ST DISTRICT, INDIANA

COMMITTEES
PUBLIC WORKS AND TRANSPORTATION
INTERIOR AND INSULAR AFFAIRS
CONGRESSIONAL STEEL CAUCUS
EXECUTIVE COMMITTEE
WHIP AT LARGE

Congress of the United States
House of Representatives
Washington, DC 20515

330 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-2461

215 WEST 35TH AVENUE
GARY, IN 46408
TTY-TDD SERVICE AVAILABLE
(219) 884-1177

CITY HALL, LOWER LEVEL
100 EAST MICHIGAN BOULEVARD
MICHIGAN CITY, IN 46380
(219) 873-1435
(219) 873-1436

May 22, 1991

1
MC

HAND DELIVERED

'91 MAY 23 P 11:39
U.S. HOUSE OF REPRESENTATIVES

Mr. Donnald K. Anderson
Clerk of the House
U.S. Capitol
Room H105
Washington, D.C. 20515

Dear Mr. Anderson:

Due to an error by my staff, I would like to make the following addendums to my 1990 Financial Disclosure Statement.

First, under Part VII, reimbursements from the Industrial Union Department, AFL-CIO, should be amended as follows:

> "Roundtrip Air from Washington, D.C. to Miami Beach, FL, 3 days lodging, food and transportation for self and spouse."
>
> I paid for all meals and transportation for my child.

Second, under Part VII, reimbursements from the Association of American Railroads, should be amended as follows:

> "Roundtrip Air from Washington, D.C. to Jacksonville, FL, 3 days lodging, meals and transportation for self and spouse."
>
> I paid for my childrens airfare and meals.

Finally, under Parts II and III, the Merrill Lynch account is a money market fund.

I regret the errors on the statement and appreciate your attention to this matter.

Sincerely,

Peter J. Visclosky
Member of Congress

PJV/kh

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:02
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Harold L. Volkmer
(Full Name)

2411 Rayburn HOB
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Missouri District: 9th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
1/91/90	Tobacco Institute	Honorarium	$2000.00	
2/08/90	Philip Morris	Honorarium	$1000.00	
5/04/90	Nat'l Assn. of Letter Carriers	Honorarium	$1000.00	
5/16/90	Council of Scientific Society Presidents	Honorarium	$250.00	
5/25/90	American Forest Res. Alliance	Honorarium	$2000.00	
6/19/90	Rockwell International	Honorarium	$1000.00	
7/27/90	KARE	Honorarium	$1000.00	
7/11/90	Hercules	Honorarium	$1000.00	
9/04/90	The Connell Company	Honorarium	$2000.00	
9/19/90	International Assn. of Fish & Wildlife	Honorarium	$1000.00	
10/16/90	Healthtrust Inc.	Honorarium	$1000.00	
10/26/90	Hecht, Spencer & Associates	Honorarium	$1000.00	
11/26/90	Chicago Mercantile Exchange	Honorarium	$750.00	
11/26/90	Board of Trade of Chicago	Honorarium	$750.00	
11/21/90	Milk Producers	Honorarium	$2000.00	
12/14/90	National Ag Chemicals Assn.	Honorarium	$1000.00	
12/14/90	Philip Morris	Honorarium	$1000.00	

For additional earned income, use next page

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Reporting Individual's Name
Harold L. Volkmer

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Farmers & Merchants Bank Hannibal, MO			X									X							X							
JT	First American Bank of Virginia Arlington, VA			X									X														
	Marion County Mutual Loan & Bldg Assn. - Hannibal, MO		X																								
S	Marion County Mutual Loan&Bldg. Assn. - Hannibal, MO		X																								
	Wright Patman Congressional Fed. Credit Union - Washington DC		X										X						X								

For additional assets and unearned income, use next page

Reporting Individual's Name
Harold L. Volkmer

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	House & lot purchased jointly with son & daughter-in-law, John P. & Elizabeth Volkmer, 1027 N. Manchester, Arlington, VA 22205	X							X			
JT	2000 Ounces of Silver		X			X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover Del				X			
JT	Continental Federal Savings Bank Fairfax, VA 22030	Joint mortgage with son & daughter-in-law John P. & Elizabeth Volkmer on property at 1027 N. Manchester Arlington, VA 22205				X			

Reporting Individual's Name
Harold L. Volkmer

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Danny Thompson Memorial Golf Tournament	Tee gifts including golf shoes, jacket, cap, shirt, golf balls and carry bag.	$170

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
The Tobacco Institute	Jan 17 - 20, 1990	Round trip air and auto;travel for self and wife to Palm Springs, California including 3 days food and lodging.	
National Rifle Association	June 8-10, 1990	Round trip air travel,car rental for annual meeting in Anaheim, California including 2 days lodging and 3 meals.	
Klamath Alliance for Resources and Environment, Redding, California	July 13-16 1990	Round trip air travel for self and wife to Redding, Northern California including 3 days of lodging and meals.	
The Connell Company	Sept 4, 1990	Round trip air travel to Newark, New Jersey and auto travel to Westfield, New Jersey, including lunch.	
Danny Thompson Memorial Golf Tournament - A Leukemia Research Benefit	Aug. 22-26 1990	Round trip air travel for self & wife to Sun Valley, Idaho, including 4 nights lodging, meals.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

PART VII Continued

Source	Date	Description
National Agricultural Chemical Association	Sept. 28-30 1990	Lodging and meals for self and wife at the Greenbrier, White Sulphur Springs, West Virginia
Chicago Mercantile Exchange	Nov. 26, 1990	Air Travel to Chicago and lunch - Air transportation from Chicago to San Diego.
National Milk Producer Federation	Nov. 26, 1990	Air Travel from San Diego, California to Washington, DC, one night lodging and 2 meals.

Reporting Individual's Name
Harold L. Volkmer

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Harold L Volkmer	May 15, 1991

GPO 1991 37-598 (m)

4598

HAROLD L. VOLKMER
8TH CONGRESSIONAL DISTRICT
MISSOURI

2411 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2956

HOUSE COMMITTEE ON
AGRICULTURE

HOUSE COMMITTEE ON
SCIENCE AND TECHNOLOGY

SELECT COMMITTEE ON AGING

INSIDE MAIL

Congress of the United States
House of Representatives
Washington, DC 20515

May 23, 1991

Hon. Donald Anderson
Clerk of the House
H-105, The Capitol
Washington, D.C. 20515

MC (2)

Dear Donald:

This letter is to amend my 1990 Financial Disclosure Statement.

On page A-2 under Parts II and III - Assets and "Unearned" Income, I inadvertantly failed to include interest income on my account at Marion County Mutual Loan and Building Association and my spouse's account at Marion County Mutual Loan and Building Association. Both of these accounts should be checked under under Block C Income as interest income for the amount between $201-$1,000.

Sincerely,

Harold L. Volkmer
Member of Congress

HLV/jf

RECEIVED
1991 MAY 24 AM 10:17
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

RECEIVED
1991 MAY 24 AM 8:58
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

Reporting Individual's Name
Harold L. Volkmer

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
JT	Farmers & Merchants Bank Hannibal, MO			X									X							X							
JT	First American Bank of Virginia Arlington, VA			X									X														
	Marion County Mutual Loan & Bldg Assn. - Hannibal, MO		X										X						X								
S	Marion County Mutual Loan&Bldg. Assn. - Hannibal, MO		X										X						X								
	Wright Patman Congressional Fed. Credit Union - Washington DC		X										X						X								

For additional assets and unearned income, use next page

4600

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 11:25

HAND DELIVERED

(Office Use Only) 9

Barbara F. Vucanovich
(Full Name)

206 Cannon House Office Building
Washington D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives — State: Nevada District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. House of Representatives MC Bilirakis	Spouse Salary	not applicable	
	Bank Administration Institute, No. NV Chapter/Reno	Speech 2/15/90	$500.00	
	Kemper Insurance Group, Crystal City Virginia	Speech 6/2/90	$1000.00	

For additional earned income, use next page

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Reporting Individual's Name
Barbara F. Vucanovich

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X							X
			George Wash. Credit Union Accounts			X									X								X					
			182 Main Street, Dover, Delaware				X							X								X						
	American Brands Stock						X						X									X						
	Ameritek Stock					X							X								X							
	AT&T Stock					X							X									X						
	Bell Atlantic Stock					X							X								X							
	Bell South Stock					X							X								X							
	Ford Motor Co. Stock					X							X									X						

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	General Electric Stock			X							X									X						
	General Motors Stock (all classes)			X							X									X						
	Hidden Valley Properties Stock		X															X								
	IBM Stock			XX							X								X							
	Kansas Power & Light Stock			X							X										X					
	Nynex Stock		X								X								X							
	Pacific Telesis Stock			X							X								X							
	Pacific Gas & Electric Stock		X								X								X							
	Sante Fe Pacific Stock& Debenture		X								X		X								X					
	Scecorp. Stock			X							X									X						
	Southwestern Bell Stock		X								X								X							
	Catellus Development Stock		X							Stock Div.								X								
	Sante Fe Energy Resourses Stock		X							Stock Div.								X								
	U.S. West Stock		X								X								X							
	Valley Bank of Nevada Stock		X								X								X							

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
California Alt. Energy Bonds			X									X								X						
California Water Revenue Bonds		X										X						X								
Chevron Corporation Bonds		X										X						X								
Clarke County Airport Bonds			X									X							X							
Elko Motor Fuel Bonds		X										X						X								
Modesto Multiple Family Housing (bonds)		X										X						X								X
State of Nevada Bonds			X									X								X						X
Orange County Apt. Dev. Bonds			X									X							X							
S.E. Texas Housing Bonds		X										X						X								X
Solano County Bonds			X									X						X								
Spokane Solid Waste Bonds		X										X							X							
Washoe County Airport Bonds			X									X								X						
First Interstate Money Markets			X									X								X						
Valley Bank of Nev. Money Markets		X										X							X							
U.S. Govt. Series E & EE Bonds			X														X									

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	IRA																										
	Bank America Stock		X								X							X									
	Nevada Power Stock		X								X							X									
	SCE Corp. Stock		X								X								X								
	Dean Witter ILA		X										X						X								
	Dean Witter U.S. Govt. Securities		X								X									X							
	Dean Witter High Yield Securities		X								X								X								X
	IRA																										
	Bank America Stock		X								X								X								
	SCE Corp Stock		X								X								X								
	Dean Witter ILA		X										X						X								
	Dean Witter Dividend Growth Fund		X								X							X									
	Dean Witter US Gov't Securities fund		X								X								X								
	Dean Witter high Yield Securities		X								X							X									X

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Dean Witter ILA Account			X									X						X								
	Dean Witter AAA Accounts			X									X						X								
	American Federal S&L Account		X										X					X									X
	Congressional Credit Union Account		X										X					X									
	Sears Tax Exempt Investment Trusts				X								X									X					
	Dean Witter Tax Exempt Securities				X								X								X						
	Allstate Municipal Income Trusts				X						X										X						
	Nuveen Preffered Plus Muni. Fund		X								X								X								
	Publis Storage Partnership		X								X							X									
	Fox& Carskadon Realty Partnership		X								X							X									
	Unimproved Land Winnemucca NV (2 lots) 8/81		X																								

4606

Reporting Individual's Name: Barbara F. Vucanovich

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Modesto Multiple Family Housing Bonds		Called		April 90	X						
	State of Nevada Bonds	X			Jan. '90	X						
	S.E. Texas Housing Bonds		Called		Dec. '90	X						
	American Federal S&L Savings Account		Closed			X						
	Deanwitter High Yield Securities (both IRAs)		X		Aug. 90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
Barbara F. Vucanovich

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors	Civil War Tapes	$135.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Republicans Abroad	7/2-8, 90	Roundtrip Air DC TO PARIS, 5 days food & lodging for Self & Spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Barbara F. Vucanovich

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Barbara F. Vucanovich	5/15/91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY -8 PM 2:56
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(Office Use Only) 6

Robert S. Walker
(Full Name)

6065 Parkridge Drive
(Mailing Address)

East Petersburg, Pennsylvania 17520

Filer Status	[X] Member of the U.S. House of Representatives — State: PA District: 16th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	School District of Lancaster (PA)	spouse salary	NA	

For additional earned income, use next page

4610

Reporting Individual's Name

Robert S. Walker

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash. Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
JT	Pennsylvania General Obligation Bonds		X															X									
JT	General Motors Stock		X								X							X									
JT	Connecticut National Bank CD (Shearson-Lehman)			X														X									X
JT	Boston Safe Deposit & Trust Co.- MA CD (Shearson-Lehman)			X									X							X							X
S	Philadelphia Life Insurance IRA		X															X									
	Philadelphia Life Insurance IRA		X															X									

For additional assets and unearned income, use next page

4611

P AND III—ASSETS AND "UNEARNED" INCOME

C. Sheet (if needed)

Reporting Individual's Name: Robert S. Walker

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)								Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Exxon Corporation Stock		x								x							x								
S	General Electric Stock		x								x							x								
S	Bell Atlantic Stock		x								x							x								
S	Chevron Stock		x								x							x								
S	Hershey Corporation Stock		x								x							x								
S	Commonwealth of Pennsylvania Public School Employees Retirement				x													x								
	Prudential Life Insurance		x															x								
S	Mutual Life Insurance Co. of New York		x															x								
JT	Life of Virginia Deferred Annuity		x															x								
	Philadelphia Life Insurance		x															x								

4612

Reporting Individual's Name
Robert S. Walker

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
JT	Connecticut National Bank CD (Shearson-Lehman)	x			3/5/90		x					
JT	Boston Safe Deposit & Trust Co.- MA CD (Shearson-Lehman)		x		3/6/90		x					

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE ☐ X

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

4613

Reporting Individual's Name: Robert S. Walker

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Electronic Industries Association Conference	Jan.5-8,1990	Roundtrip air from Wash.,D.C. to Las Vegas, 4 days food & lodging, self & spouse	
Congressional Institute Inc.	Feb.22-24,1990	Roundtrip train from Wash., D.C. to Priceton, NJ, 3 days food & lodging	
Brookings Institution	May 10, 1990	1 night food & lodging in Charlottesville, VA for seminar participation	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Robert S. Walker

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Robert S. Walker	May 7, 1991

GPO 1991 37 598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 11:13

HAND DELIVERED

James T. Walsh
(Full Name)

400 Broadview Drive
(Mailing Address)

Syracuse, New York 13215

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 27th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Contact-Syracuse, Inc., Syracuse, New York	Spouse Compensation	N/A	

For additional earned income, use next page

4616

Reporting Individual's Name

James T. Walsh

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock	X								X								X									X
			George Wash. Credit Union Accounts		X									X								X							
			182 Main Street, Dover, Delaware			X							X								X								
	Prudential-Bache IRA Rollover A/C Holding the Following Assets:																												
	Affiliated Fund Incorporated			X								X							X										
	American Capital Gov't Securities			X								X								X									
	Ariel Growth Fund			X								X							X										
	Templeton Funds Incorporated			X								X								X									
	Prudential Bache Inconvertible																												

For additional assets and unearned income, use next page

4617

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James T. Walsh

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Plus Fund-Class B		X								X								X								
	Prudential Bache Equity Income																										
	Fund-Class B		X								X								X								
	Park Avenue Associates General																										
	Partnership--Rental Properties at																										
	Wall St., Syracuse, N.Y. and																										
	197 E. Genesee St., Skaneateles, NY	X												X								X					

Reporting Individual's Name

James T. Walsh

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Sale of Interest in Park Avenue Associates General Partnership		X		7/23/90	X						

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

Reporting Individual's Name
James T. Walsh

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C. to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Lighthawk Not-for-Profit Organization		8/25-27/90	Roundtrip air Syracuse to Seattle; food, lodging and travel - self and son; fact-finding & education re: logging practices and national forest	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S C 7342)

Reporting Individual's Name

James T. Walsh

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Director	Erie Canal Museum
Director	Kidney Foundation of CNY Chapter

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
N/A	New York State and Local Retirement Systems	Pension Plan Interest Available at Retirement Age
N/A	NYNEX Retirement Plan	Pension Plan Interest Available at Retirement Age

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
James T. Walsh	5/14/91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 1:41
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(Office Use Only) 8

4622

CRAIG A. WASHINGTON
(Full Name)

2323 Caroline Street, #1000
(Mailing Address)

Houston, Texas 77004

Filer Status	[X] Member of the U.S. House of Representatives — State: TEXAS District: 18	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	WASHINGTON LAMPLEY EVANS & BRAQUET	Legal Service Fees	$ 25,000	
	WASHINGTON LAMPLEY EVANS & BRAQUET	Payment towards liq. of prtsh. int.	$ 69,531	

For additional earned income, use next page

Reporting Individual's Name
CRAIG A. WASHINGTON

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

S, DC, JT	BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	BLOCK B Valuation of Asset: Category of Value (X) A: none (or less than $1,001)	B: $1,001 - $15,000	C: $15,001 - $50,000	D: $50,001 - $100,000	E: $100,001 - $250,000	F: $250,001 - $500,000	G: $500,001 - $1,000,000	H: over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I: none (or less than $201)	II: $201 - $1,000	III: $1,001 - $2,500	IV: $2,501 - $5,000	V: $5,001 - $15,000	VI: $15,001 - $50,000	VII: $50,001 - $100,000	VIII: $100,001 - $1,000,000	IX: over $1,000,000	Block D Transaction (X)
Examples: S	ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	EXXON	X															Royalty	X									
	ATLANTIC RICHFIELD	X									X							X									
	WASHINGTON LAMPLEY EVANS & BRAQUET									X UNKM.		X											X				
	OZELL PRICE, ATTORNEY											X									X						
	OLIVER SPROTT, ATTORNEY											X										X					
	DAN NICHOLS											X								X							

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG A. WASHINGTON

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	MICHAEL STEPHENS											X								X						
	TRACY MAYRELL											X									X					
	BEVERLY FERGUSON											X									X					
	GREAT NORTHWEST PUBLISHER											X								X						

Reporting Individual's Name
CRAIG A. WASHINGTON

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	UNIVERSITY SAVINGS/NCNB/RTC	Real Property Mortgage			X				
	SUNBELT NATIONAL MORTGAGE CORP.	" " "		X					
	TEXAS TRUST SAVINGS BANK, FSB	" " "		X					
	REGIONAL INVESTMENTS	" " "		X					
	TEXAS BANC SAVINGS	" " "			X				

Reporting Individual's Name
CRAIG A. WASHINGTON

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES CONTINUATION SHEET

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	DR. A. H. BROOKS	Real Property Mortgage	X						
	J. W. & BLANCHE BANKES	" " "			X				

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Reporting Individual's Name
CRAIG A. WASHINGTON

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
			SEE ATTACHEMENT/P. A-4a TO THIS PAGE	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Attachment to Financial Disclosure Statement Page-4(a)
For Calendar Year 1990
PART VII-"Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

	If Gift "X"
1. Nat'l Assn. Of Black Journalists Mar. 16-18, 1990 Roundtrip air travel from Wash., D.C. to Austin, Tx., 1 day of lodging, 1 day of food	
2. Human Rts. Campaign Fund Apr. 20-21, 1990 Roundtrip air travel from Wash., D.C. to Key FL., 2 days food & lodging, self and guest/spouse	
3. Nat'l Lawyers Guild Convention May 31-June 1, 1990 Roundtrip air travel from Houston, Tx to Austin, Tx., 2 days food & lodging, self and guest/spouse	
4. Community Relations Council of the Jewish Federation of Greater Houston June 28-July 7, 1990 Roundtrip air travel from Wash., D.C. to Israel, 8 days food & lodging, self and guest/spouse	
5. Senior PGA Tournament Aug. 5-Aug. 6, 1990 Roundtrip air travel from Wash. D.C. to Jacksonville, FL, 1 day of lodging; self and guest/spouse	
6. National Conference of State Legislatures Aug. 8-Aug. 9, 1990 Roundtrip air travel from Wash. D.C. to Nashville, TN; 1 day of food and lodging	
7. Danny Thompson Annual Memorial Golf Tournament Cmte. Aug. 22-Aug. 26, 1990 Roundtrip air travel from Houston, Tx. to Sun Valley, ID; 4 days food and lodging; golf tournament guest/participant; self and guest/spouse	
8. FIMPES Aug. 29-Sept. 1, 1990 Roundtrip air travel from Houston to Oaxaca, Mexico; 2 days food and lodging; self and guest/spouse	
9. Texas Populist Alliance Sept. 7-Sept. 8, 1990 Roundtrip air travel from Wash. D.C. to Austin, Tx; 1 day of food and lodging	
10. Human Rights Campaign Fund Nov. 10-Nov. 11, 1990 Roundtrip air travel from Houston, Tx. to San Antonio, Tx.; 1 day of food and lodging; self and guest/spouse	

Reporting Individual's Name

CRAIG A. WASHINGTON

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
GENERAL PARTNER	WASHINGTON LAMPLEY EVANS & BRAQUET
PRESIDENT	WASHINGTON PROPERTIES
GENERAL PARTNER	MAHOGANY INTERESTS

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
12/31/90	SIDNEY J. BRAQUET MELVIN LAMPLEY, LARRY Q. EVANS, CRAIG A. WASHINGTON	Continued payments towards liquidation of prtshp. int.if, as, and when available.

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature]

DATE (Month, Day, Year): May 15, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

CRAIG A. WASHINGTON
(Full Name)

2323 CAROLINE STREET, #1000
(Mailing Address)

HOUSTON, TEXAS 77004

Filer Status	[X] Member of the U S House of Representatives	State TEXAS District 18	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date

MC HAND DELIVERED

(Office Use Only)

9

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	WASHINGTON LAMPLEY EVANS & BRAQUET	Legal Service Fees	$ 25,000	
	WASHINGTON LAMPLEY EVANS & BRAQUET	Payment towards liquidation of partnership interest.	$ 69,531	

For additional earned income, use next page

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Reporting Individual's Name
CRAIG A. WASHINGTON

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

S, DC, JT	BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	BLOCK B Valuation of Asset: Category of Value (X) A: none (or less than $1,001)	B: $1,001 - $15,000	C: $15,001 - $50,000	D: $50,001 - $100,000	E: $100,001 - $250,000	F: $250,001 - $500,000	G: $500,001 - $1,000,000	H: over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I: none (or less than $201)	II: $201 - $1,000	III: $1,001 - $2,500	IV: $2,501 - $5,000	V: $5,001 - $15,000	VI: $15,001 - $50,000	VII: $50,001 - $100,000	VIII: $100,001 - $1,000,000	IX: over $1,000,000	Block D Transaction (X)
S	Examples: ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	EXXON	X															Royalty	X									
	ATLANTIC RICHFIELD (STOCK)	X									X						Dividend	X									
	2323 CAROLINE STREET HOUSTON, TEXAS 77004 (LAW FIRM)											X					Office Rent							X			
	2323 CAROLINE STREET HOUSTON, TEXAS 77004 (PRICE)											X					Office Rent				X						
	2323 CAROLINE STREET HOUSTON, TEXAS 77004 (SPROTT)											X					Office Rent					X					
	5643 ELM SPRINGS HOUSTON, TEXAS			X								X					Residential Dwelling			X							

For additional assets and unearned income use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG A. WASHINGTON

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income												BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)										
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																											
3443 PALM STREET HOUSTON, TEXAS				X							X					Resident Dwelling		X									
713 CAROLYN, #A AUSTIN, TEXAS 78705				X							X					Resident Dwelling				X							
713 CAROLYN #B AUSTIN, TEXAS 78705											X					Resident Dwelling				X							
901 12TH STREET HEMPSTEAD, TEXAS				X							X					Office Rent			X								
3823 BOTANY HOUSTON, TX.			X								X					Resident Dwelling			X								
1127 MOODY GALVESTON, TEXAS (OFFICE BLDG / RESIDENT DWELLING)				X																							
3101 KIRK STREET HOUSTON, TEXAS (UNIMPROVED LOT)		X																									
2816 BLODGETT HOUSTON, TEXAS (UNIMPROVED LOT)			X																								
2802 BLODGETT HOUSTON, TEXAS (UNIMPROVED LOT)			X																								
UNIMPROVED LOT BRAZORIA COUNTY, TEXAS	X																										
UNIMPROVED LOT HARDIN COUNTY, TEXAS	X																										
UNDIVIDED INTEREST IN RURAL LAND NACOGDOCHES COUNTY, TEXAS	X																										
U. S. SAVINGS BONDS			X						FACE VALUE																		
NCNB FANNIN HOUSTON, TEXAS	X																										
2323 CAROLINE STREET, (OFC. BUILDING, HOUSTON, TX. 2 UNIMPROVED LOTS & PARK-LOT)						X																					

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: CRAIG A. WASHINGTON

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	WASHINGTON LAMPLEY EVANS & BRAQUET PARTNERSHIP INTEREST									X UNKNOWN																
	WASHINGTON PROPERTIES (NO ASSETS) 1/2 OWNERSHIP OF STOCK	X																								
	MAHOGANY INTERESTS (NO ASSETS) HOUSTON, TX.	X																								
	3243 PINE STREET DALLAS, TEXAS			X						Resident Dwelling																

Reporting Individual's Name
CRAIG A. WASHINGTON

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	UNIVERSITY SAVINGS/NCNB/RTC	REAL PROPERTY MORTGAGE			X				
	SUNBELT NATIONAL MORTGAGE CORP.	" " "		X					
	TEXAS TRUST SAVINGS BANK, FSB	" " "		X					
	REGIONAL INVESTMENTS	" " "		X					
	TEXAS BANC SAVINGS	" " "			X				

Reporting Individual's Name
CRAIG A. WASHINGTON

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES CONTINUATION SHEET

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	DR. A. H. BROOKS	REAL PROPERTY MORTGAGE	X						
	J. W. & BLANCHE BANKES	" " "			X				

Reporting Individual's Name
CRAIG A. WASHINGTON

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
			SEE ATTACHEMENT/P. A-4a TO THIS PAGE	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Attachment to Financial Disclosure Statement Page-4(a)
For Calendar Year 1990
PART VII-"Reimbursements" and Gifts of Transportation, Lodging, Food, Entertainment

	If Gift "X"
1. Nat'l Assn. Of Black Journalists Mar. 16-18, 1990 Roundtrip air travel from Wash., D.C. to Austin, Tx., 1 day of lodging, 1 day of food	
2. Human Rts. Campaign Fund Apr. 20-21, 1990 Roundtrip air travel from Wash., D.C. to Key FL., 2 days food & lodging, self and guest/spouse	
3. Nat'l Lawyers Guild Convention May 31-June 1, 1990 Roundtrip air travel from Houston, Tx to Austin, Tx., 2 days food & lodging, self and guest/spouse	
4. Community Relations Council of the Jewish Federation of Greater Houston June 28-July 7, 1990 Roundtrip air travel from Wash., D.C. to Israel, 8 days food & lodging, self and guest/spouse	
5. Senior PGA Tournament Aug. 5-Aug. 6, 1990 Roundtrip air travel from Wash. D.C. to Jacksonville, FL, 1 day of lodging; self and guest/spouse	
6. National Conference of State Legislatures Aug. 8-Aug. 9, 1990 Roundtrip air travel from Wash. D.C. to Nashville, TN; 1 day of food and lodging	
7. Danny Thompson Annual Memorial Golf Tournament Cmte. Aug. 22-Aug. 26, 1990 Roundtrip air travel from Houston, Tx. to Sun Valley, ID; 4 days food and lodging; golf tournament guest/participant; self and guest/spouse	
8. FIMPES Aug. 29-Sept. 1, 1990 Roundtrip air travel from Houston to Oaxaca, Mexico; 2 days food and lodging; self and guest/spouse	
9. Texas Populist Alliance Sept. 7-Sept. 8, 1990 Roundtrip air travel from Wash. D.C. to Austin, Tx; 1 day of food and lodging	
10. Human Rights Campaign Fund Nov. 10-Nov. 11, 1990 Roundtrip air travel from Houston, Tx. to San Antonio, Tx.; 1 day of food and lodging; self and guest/spouse	

Reporting Individual's Name
CRAIG A. WASHINGTON

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
GENERAL PARTNER	WASHINGTON LAMPLEY EVANS & BRAQUET
PRESIDENT	WASHINGTON PROPERTIES
GENERAL PARTNER	MAHOGANY INTERESTS

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
12/31/90	SIDNEY J. BRAQUET, MELVIN L. LAMPLEY, LARRY Q. EVANS CRAIG A. WASHINGTON	Continued payments towards liquidation of partnership interest, if, as and when available.

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S C. app. 6, § 101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U.S.C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	June 28, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAXINE WATERS
(Full Name)

609 South Grand Ave.,Ste.960
(Mailing Address)

Los Angeles, CA 90017

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 29	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

1991 MAY 15 PM 3 00

HAND DELIVERED

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	State of California	Salary	35,750	
	Mercedes Benz of Hollywood	Salary--spouse	NA	
	Mercedes Benz of Hollywood	Spouse--prizes/awards & Substitute Payment	NA	
	Amer.Fed.of State County & Mun.Emply.,AFL-CIO	Speech	1,000	
	Mason's of Seattle	Speech	1,000	
	Essence Communications	Director's Fee	4,250	
	Operation Shoestring	Speech	1,000	
	Harvard Law School	Speech	1,000	
	California State University,Long Beach	Speech	1,000	
	California Trial Lawyers Association	Speech	1,000	

For additional earned income, use next page

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Reporting Individual's Name
MAXINE WATERS

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
National Headstart Directors Assn.	Speech	1,000	
Dr. Ernest Shaw Memorial Committee	Speech	200	
Association of Trial Lawyers	Speech	1,000	
Women's Conv.Auxiliary National Baptist Conf./USA,Inc.	Speech	200	
Playboy Enterprises	Awards Prog.meeting	300	
Jowcol Music	M.C.for Program	800	
First New Christian Fellowship Miss.Baptist Church	Speech	500	
Messiah Baptist Church	Speech	400	

Reporting Individual's Name

MAXINE WATERS

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples — S — ABC Corporation Stock			X								X								X								X
Examples — George Wash. Credit Union Accounts				X									X								X						
Examples — 182 Main Street, Dover, Delaware					X							X								X							
Broadway Savings and Loan			X										X							X							
S — Malcolm Tibye, T.Mallen, Seller Fin. Mortgage				X									X									X					
S — Family Savings		X											X					X									
S — Founders Savings			X										X						X								
S — Mid City Bank (Form. Wilshire Bank)			X										X						X								
S — NY Life			X										X						X								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MAXINE WATERS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Wells Fargo Bank		x										x					x									
	Kempers Investors Growth Fund	x											x					x									
	Essence Communications			x														x									
S	9615 5th Ave.,Inglewood,CA					x												x									
S	Tract Unit 3557,Lot 96,Kern Co.			x														x									
S	417 Pearl St.,Compton,CA				x							x										x					
S	2201 Kirk St.,Houston,TX				x													x									
S	1520-22 Meadowbrook,Los Angeles,CA						x					x												x			
	3475 Mt.Vernon Dr.,Los Angeles,CA						x					x									x						
S	701 W.Barstow;Palm Springs,CA			x														x									
S	1044 W.82nd St.,Los Angeles,CA					x												x									
S	5779 W.Venice, Los Angeles,CA			x									x								x						

Reporting Individual's Name

MAXINE WATERS

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
S	Metor Finnncial,Inc.	Mortgage on 417 Pearl St.,Compton		x					
S	Founders Savings and Loan	Mortgage on 1044 W.82nd St.,LA			x				
S	Founders Savings and Loan	Mortgage on 1520-1522 Meadowbrook				x			
S	Broadway Federal Savings and Loan	Mortgage on 9615 5th Ave.,Inglewood			x				
	Family Savings and Loan	Mortgage on 3475 Mt.Vernon Dr.		x					

Reporting Individual's Name

MAXINE WATERS

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
S	Mid City Bank (Formerly Wilshire Bank)	Credit Line		x					

Reporting Individual's Name

MAXINE WATERS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name
MAXINE WATERS

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Director	Essence Communications
Director	Warwick Foundation
President	Black Women's Forum
Director	Gourmet Services

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Maxine Waters	May 15,1991

GPO 1991 37-568/(m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 PM 3:52
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

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(Office Use Only) 9

Henry Arnold Waxman
(Full Name)

2418 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives	State California District 24	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Los Angeles Times Los Angeles, California 10/10/90	op-ed	$400	
	National Restaurant Association 12/7/89 Washington, DC	honoraria	$2000	
	Self Insurance Industry of America 1/24/90 Wash, D.C.	honoraria	$2000	
	American Hospital Association 1/31/90 Wash, D.C.	honoraria	$5000	x $3000
	California Hospital Association 1/31/90 Wash, D.C.	honoraria	$3000	x $1000
	Pharmaceutical Industry Investors 2/6/90 New York City	honoraria	$4950	x $2950
	National Association of Wholesale Distributors 2/7/90 Wash. D.C.	honoraria	$5000	x $3000
	American College of Pathologists 2/23/90 Wash. D.C	honoraria	$2000	
	Graphic Communications International Union 2/27/90 Wash. D.C.	honoraria	$1500	
	Sheppard Pratt Hospital 11/16/90 Baltimore, MD.	honoraria	800	
	Self-employed Speech Instructor	spouse salary		

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Reporting Individual's Name

Henry Arnold Waxman

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Nat'l Assoc. Medical Directors of Respiratory Care 3/9/90 San Francisco, CA	honoraria	$1000	
American Medical Association 3/16/90 Naples, FLA	honoraria	$1000	
Health Benefits America 3/22/90 Wash. D.C.	honoraria	$2000	
Am. Society for Clinical Pharmacology & Therapeutics 3/23/90 San Francisco, CA	honoraria	$3000	x $1000
Ketchum Communications, Inc. 3/26/90 Palm Springs, CA	honoraria	$2313	x $313
American Group Practice Association 4/6/90 Wash,D.C.	honoraria	$3000	x $1000
American Academy of Family Physicians 4/20/90 Wash,DC	honoraria	$2000	
National Confectioners Association 4/30/90 Wash,D.C.	honoraria	$1000	
Chocolate Manufacturers Association 4/30/90 Wash,D.C.	honoraria	$1000	
American Federation for Clinical Research 5/7/90 Wash. DC	honoraria	$2000	
American Association Anesthesiologists 5/15/90 Wash DC	honoraria	$2000	
American College of Cardiology 5/18/90 Wash.D.C.	honoraria	$2000	
Snack Food Association 6/20/90 Wash.,D.C.	honoraria	$2000	
Nevada Power Company 8/16/90 Reno, Nevada	honoraria	$1400	
Irvine Company 8/21/90 Irvine, CA	honoraria	$1760	
Wine Institute 8/25/90 San Francisco, CA	honoraria	$1800	
Washington Post Washington, D.C. 9/7/90	Op-ed	$200	
National Association of Medical Equipment 9/10/90 Washington, D.C.	honoraria	$2000	
Blue Cross Blue Shield 9/19/90 Wash., D.C.	honoraria	$2000	
Atlantic Information Seminar 10/1/90 Wash. D.C.	honoraria	$5000	x $3000
National Association of Temporary Services 9/18/90	honoraria	$5000	x $3000

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4648

Henry A. Waxman
Financial Disclusre Statement 1990
Part 11

Total Honoraria	$70,123.00
Donated to Charity	43,463.00
Income	26,660.00

Reporting Individual's Name

Henry A. Waxman

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	1. Maryland Federal Savings & Loan			X									X						X								
	2. Heritage International Bank		X										X					X									
	3. Keough fund:																										
	(Keough) Pacifica Government Money Market Fund			X																X							
	Santa Anita Realty Enterpirse (Keough)		X								X										X						

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Henry A. Waxman

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income													BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	4. IRA																									
	Paine WeberRetirement Money ~~Market Account (IRA)~~		X										X													
	Santa Anita Realty Enterprise (IRA)		X								X															
	5. Thrift Savings Plan for Federal Employees			X														X								

Reporting Individual's Name

Henry A. Waxman

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	over
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Pacific Gov't money market account (Keough)	X			4 15 90	x						

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting perio Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or siblir of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☒ xx

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	over
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NONE								

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Reporting Individual's Name

Henry A. Waxman

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
Pharmaceutical Industry Investors	2/6/90	roundtrip airfare from Wash,D.C.to NYC one night lodging & food self	
Nat'l Assoc. Medical Directors on Respiratory Care	3/9/90	roundtrip LA-San Fran-LA self	
American Medical Association	3/15-17/90	self and spouse roundtrip airfare (Wash-Naples) three nights food and lodging	
Am. Society for Clinical Pharacology	3/23-24/90	travel (wash-SF) lodging and one night & food self	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

continued on next page

Henry A. Waxman
Ethics in Government Act continuation
Part VII--

Ketchum Communications March 26-27,Palm Springs, CA travel(San Diego-Wash) one night food and lodging self

Nevada Power company August 16-17th one night food lodging, airfare LA-Las Vegas

Irvine Company August 21-23- two nights travel (Wash-Irvine,CA) food and lodging and car rental, self and spouse

Wine Institute August 25 /27 two nights travel(Los Angeles -SF) food and lodging and car rental, self and spouse

Sheppard Pratt Hospital (Symposium of Schizophrenia) November 16-17, 1990 one night food and lodging [redacted], self

Reporting Individual's Name
Waxman

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [xx]

Positions	Name of Organization
NONE	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [xx]

Date	Parties To	Terms of Agreement
	NONE	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Henry A Waxman	May 10, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

John Vincent Weber
(Full Name)

106 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date ____

In all sections, please type or print clearly in black ink.

1991 MAY 15 PM 2:30
HOUSE OF REPRESENTATIVES
HAND DELIVERED

mc (Office Use Only) 9

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PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Department of Housing and Urban Development	spouse salary	NA	
	Alan Freed and Associates (July 16, 1990)	speech	$200	
	American Cement Alliance (March 9, 1990)	speech	$1000	
	American Feed Industry (Sept. 14, 1990)	" "	$1000	
	American Horse Council (June 15, 1990)	" "	$500	
	American Meat Institute (June 21, 1990)	" "	$1500	
	American Supply Association (June 21, 1990)	" "	$1000	
	Brookings Institute (March 19, 1990)	" "	$400	
	" " " (March 23, 1990)	" "	$400	
	" " " (April 9, 1990)	" "	$400	

For additional earned income, use next page

Reporting Individual's Name

WEBER

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Chicago Board of Trade (May 2, 1990)	Speech	$750	
Chicago Mercantile Exchange (May 2, 1990)	" "	$750	
CIGNA (June 21, 1990)	" "	$500	
Cable News Network (August 9, 1990)	TV appearance	$200	
Council for Advancement & Support of Education (Feb.28,90)	Speech	$250	
Distilled Spirits (Aug. 6, 1990)	" "	$2000	
Farm Women's Leadership Forum (July 13, 1990)	" "	$250	
Fertilizer Institute (July 24, 1990)	" "	$2000	
International Council of Shopping Centers (April 5, 1990)	" "	$2000	
National PAC (Nov. 20, 1990)	" "	$1000	x (12-10-90)
National Federation of Independent Businesses (June 5, 1990)	" "	$1000	
National Restaurant Association (May 30, 1990)	" "	$1000	
" " " (May 30, 1990)	" "	$1000	
" " " (Oct. 29, 1990)	" "	$2000	(12-3-90) x (12-19-90)
Northrup Corporation (July 14, 1990)	" "	$2000	
Rockwell International (June 21, 1990)	" "	$1000	
John Drown , on behalf of Schwann's (Aug. 20, 1990)	" "	$500	
UpJohn (Aug. 6, 1990)	" "	$2000	
Washington Caucus (May 18, 1990)	" "	$500	
Wholesale Grocers (July 16, 1990)	" "	$1000	

Reporting Individual's Name
WEBER

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
W.R.Grace (Oct. 5, 1990)	Speech	$2000	x ($250) (12-3-90) (12-27-90)
Cornell University (Dec. 27, 1990)	" "	$500	x (12-27-90)

Reporting Individual's Name

WEBER

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
	Midwest Resources (formerly Iowa Resources) (common stock)			X								X								X								
	NICOR (stock)			X								X							X									
	Wright Patman Congressional Federal Credit Union - IRA				X									X							X							
S	Wright Patman Congressional Federal Credit Union - IRA			X										X						X								
	Wright Patman Congressional Federal Credit Union (other accts)			X										X							X							
	MN Valley Savings Bank		X											X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: WEBER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	2138 Dream Drive, North Mankato, Minnesota (rental property)				X							X										X					
	2140 Dream Drive, North Mankato, Minnesota (rental property) (33 1/3%)			X						X**		X									X*						
	Property in Pine Lake, MN (Cass Cty) Lot 4, Block 2 (50%)		X															X									
	Lifetime Money Market Trust (GnL Consultants, Greenwich, CT)			X							X								X								
	*income categorized as gross, actual net loss																										
	**value estimated based on the property tax value of 2138 Dream Drive property (half of duplex)																										

Reporting Individual's Name

WEBER

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	MN Valley Savings Bank, Mankato, Minnesota	Mortgage on 2138 Dream Drive		X					
	D.W.Jones, Walker, Minnesota	Mortgage on Pine Lake property (Lot 4, Block 2) (50%)	X						
	Wells Federal and Loan, Wells, Minnesota	Mortgage on 2140 Dream Drive (33 1/3%)		X					

Reporting Individual's Name
WEBER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
New York Jewish Community Relations Council	1/6-1/15 1/8-1/14	Roundtrip airfare from D.C. to Israel Food and lodging for 7 days and 6 nights	
U.S. Jaycees	1/18-1/21	Roundtrip airfare from D.C. to Oklahoma for self and spouse, Food and lodging for 3 days and 2 nights for self and spouse	
Congressional Institute	2/22-2/24	Roundtrip Amtrak ticket; food and lodging for 3 days and 2 nights	
National Federation of Independent Businesses	4/23-4/24	Roundtrip airfare from D.C. to Boston; one night lodging in private home	
Heritage Foundation	4/26-4/27	Roundtrip airfare from D.C. to Chicago; One night lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

(add'l page for WEBER)

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C. to Seattle, 3 days food & lodging, self and spouse	
National Restaurant Association		5/18-5/20	Roundtrip airfare from D.C. to Chicago for self and spouse; Food and lodging for 3 days and 2 nights for self and spouse	
Rockwell International		5/30-5/31	One-way airfare from D.C. to Los Angeles; One night lodging	
Cornell University		12/13	Roundtrip airfare from D.C. to New York; (no overnight lodging)	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C 7342)

Reporting Individual's Name
WEBER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to. future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5/15/91

GPO 1991 37-498 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 10 AM 11:06
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 5

THEODORE S. WEISS
(Full Name)

2467 Rayburn HOB, Washington, DC 20515
(Mailing Address)

Filer Status	XX Member of the U S House of Representatives	State New York District 17	Officer or Employee	Employing Office
Report Type	XX Annual (May 15)	Amendment	Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash . D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	New York State	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
THEODORE S. WEISS

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude. Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples. S ABC Corporation Stock			X								X								X								X
	George Wash. Credit Union Accounts				X									X								X						
	182 Main Street, Dover, Delaware					X							X								X							
S	Citibank		X											X					X									
JT	Fidelity Investments				X							X									X							
	Wright Patman Congressional Federal Credit Union		X											X					X									

For additional assets and unearned income, use next page

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Reporting Individual's Name
THEODORE S. WEISS

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [XX]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
THEODORE S. WEISS

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [XX]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Human Rights Campaign Fund		9/15-16/90	Roundtrip Air from New York City to Minneapolis, food and lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
THEODORE S. WEISS

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [XX]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [XX] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Theodore S. Weiss	May 8, 1991

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 9:35

HAND DELIVERED

Wayne Curtis Weldon
(Full Name)

49 Weathervane Road
(Mailing Address)

Aston, Pennsylvania 19014

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 8

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Crozer-Chester Medical Center	Spouse Salary	NA	
	American Indian Association (Red'd 8/90)	Honorarium	2,000	
	Nutri/System, Inc. (Rec'd 12/90)	Honorarium	2,000	
	American Fire Sprinkler Association, Inc. (Rec'd 11/90)	Honorarium	2,000	
	QVC Network, Inc. (Rec'd 11/90)	Honorarium	2,000	
	University of Pennsylvania (Rec'd 1/90)	Honorarium	1,250	
	The Dow Chemical Company (Rec'd 11/90)	Honorarium	1,000	
	Halon Research Institute (Rec'd 9/90)	Honorarium	1,000	
	Association of the U.S. Army (Rec'd 2/90)	Honorarium	740	

For additional earned income, use next page

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Reporting Individual's Name

Wayne Curtis Weldon

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Franklin Mint Fed. Cr. Union Accounts		X										X					X									
	Congressional Fed. Cr. Union Account	X											X					X									
DC	Springfield Fed. S & L Assn.	X											X					X									
	700 4th St., Washington, D.C.					X						X										X					

For additional assets and unearned income, use next page

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Reporting Individual's Name: Wayne Curtis Weldon

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Franklin Mint Federal Credit Union	Mortgage on 700 4th St. Wash., D.C.				X			

4672

Reporting Individual's Name
Wayne Curtis Weldon

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
SEE ATTACHED			

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

FINANCIAL DISCLOSURE STATEMENT
WAYNE CURTIS WELDON

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

SOURCE	DATE	BRIEF DESCRIPTION
Underwriter Laboratories	January 15, 1990	Roundtrip air travel from Philadelphia, PA to Chicago, Illinois, and meals
Industrial Loss Prevention Control Conference	January 16, 17, 1990	Roundtrip air travel from Philadelphia, PA to Orlando, Florida, and meals and lodging
Forest Fire Prevention for the 90's	February 12, 1990	Roundtrip air travel from Philadelphia, PA to Ft. Mitchell, Kentucky, and meals and lodging
Oregon Fire Chiefs NW Fire Service Meeting Seminar	March 1, 2, 1990	Roundtrip air travel from Washington, D.C. to Portland, Oregon, and meals and lodging
National Fire Sprinkler Assoc. Conference	March 9-12, 1990	Roundtrip air travel from Philadelphia, PA to Nassau, Bahamas, and meals and lodging
Urban Fire Forum, NFPA	March 15, 1990	Roundtrip air travel from Washington, D.C. to Boston, Massachusetts, and meals
ISFSI/FDIC Annual Mtg.	April 7, 8, 1990	Roundtrip air travel from Philadelphia, PA to Cincinnati, Ohio, and meals and lodging
National Association of State Fire Marshals	April 8, 9, 1990	Roundtrip air travel from Cincinnati, Ohio to Minnetonka, Minnesota, to Philadelphia, PA and meals and lodging
New York Assoc. of Fire Dist. Annual Meeting	May 7, 1990	Roundtrip air travel from Philadelphia, PA to White Plains, New York, and meals

FINANCIAL DISCLOSURE STATEMENT
WAYNE CURTIS WELDON

PART VII - "REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

SOURCE	DATE	BRIEF DESCRIPTION
Scotland National Fire Assoc.	June 16-18, 1990	Roundtrip air travel from Philadelphia, PA to Scotland, and meals and lodging
Florida State Fire Chiefs Conference	July 15, 1990	Roundtrip air travel from Philadelphia, PA to Brevard, Florida, and meals and lodging
Vermont State Fire Fighters Assoc. Annual Meeting	July 28, 1990	Roundtrip air travel from Philadelphia, PA to Burlington, Vermont, and meals and lodging
International Assoc. of Fire Fighters Biennial Conf.	August 9, 1990	Roundtrip air travel from Washington, D.C. to St. Louis, Missouri, and meals and lodging
IAFC Annual Conference	August 20, 1990	Travel/mileage reimbursement to Orlando, Florida, and lodging
American Sprinkler Assoc. Annual Conference	September 21, 1990	Roundtrip air travel from Philadelphia, PA to Hilton Head, South Carolina, and meals and lodging

Reporting Individual's Name

Wayne Curtis Weldon

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
SEE ATTACHED	

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1/2/1987	CIGNA, Inc.	leave of absence, with no pay or benefits

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Curt Weldon	5/12/92

GPO: 1991 37-508 (#4)

4676

FINANCIAL DISCLOSURE STATEMENT
WAYNE CURTIS WELDON

PART VIII - POSITIONS

POSITIONS	NAME OF ORGANIZATION
Director	Sacred Heart Medical Center
Board Member	Shepherd's Kitchen
Board Member	Theater Exchange International
Board Member	Crossmen Drum & Bugle Corp
Board Member	Stages of Imagination

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

MAY 15 4:45

HAND DELIVERED
MC
(Office Use Only) 5

Alan D. Wheat
(Full Name)

11820 Troost
(Mailing Address)

Kansas City, MO 64131

Filer Status	[X] Member of the U.S. House of Representatives — State: Missouri District: 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Morrison & Foerster	Spouse Salary	NA	
	MassMutual (May 11, 1990)	Speech	$2,000	x

For additional earned income, use next page

4678

Reporting Individual's Name

Alan D. Wheat

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

			BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
			Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
			1251 S. Carolina Ave, S.E., Wash, DC rental property					X						X										X					
			Wright Patman Credit Union savings		X										X						X								

For additional assets and unearned income, use next page

4679

Reporting Individual's Name
Alan D. Wheat

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
	American Home Funding	Mortgage on 1251 S. Carolina S.E. Washington, DC				x			
	Dominion Bank of VA	Mortgage on 1251 S. Carolina S.E. Washington, DC				x			

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Reporting Individual's Name
Alan D. Wheat

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$138

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Federal Express	10/13/90	Roundtrip Air from Philadelphia to Kansas City	
Danny Thompson Foundation	8/22-27/90	Roundtrip Air from Wash, DC to Sun Valley, ID, Self & Spouse food & lodging	
Dem. Cong. Campaign Committee	5/4/90	Airfare from Wash, DC to Boston & Chicago	
Hannibal Days Committee, MO	3/2-4/90	Roundtrip from Wash, DC to Hannibal, MO & lodging Self & Fiance	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Alan D. Wheat

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Board of Directors	Martin Luther King Commission
Board of Directors	Oxfam
President	Congressional Black Caucus Foundation

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

ALAN WHEAT
5TH DISTRICT, MISSOURI

MEMBER
COMMITTEE ON RULES
SELECT COMMITTEE ON CHILDREN, YOUTH AND FAMILIES
SELECT COMMITTEE ON HUNGER

Congress of the United States
House of Representatives
Washington, DC 20515-2505

1210 LONGWORTH BUILDING
WASHINGTON, DC 20515-2505
202 225-4535

811 GRAND AVENUE #938
KANSAS CITY, MO 64106-1997
842-4545

301 WEST EXCHANGE #22
INDEPENDENCE, MO 64050-3724
833-4545

May 22, 1991

HAND DELIVERED

MC

1

The Honorable Donnald K. Anderson
Clerk of the House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, DC 20515

Dear Donn:

Please amend my 1990 financial disclosure to reflect the following change:

Part VII--Reimbursements and Gifts of Transportation, Lodging, Food, Entertainment

Danny Thompson Foundation 8/22-27/90 Roundtrip Air from Washington, DC to Sun Valley, Idaho, Self & Spouse, food & lodging 8/22-25/90; 8/26-27/90 paid personally (addition underlined).

Thank you for your assistance.

Sincerely,

Alan Wheat
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

RECEIVED
1991 MAY 15 PM 8 26
INSIDE MAIL

Jamie L. Whitten
(Full Name)

2314 Rayburn Bldg.,
(Mailing Address)

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Ms. District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
NONE				

For additional earned income, use next page

4684

Reporting Individual's Name

Jamie L. Whitten

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																	Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X									X
	George Wash. Credit Union Accounts			X									X								X							
	182 Main Street, Dover, Delaware				X							X								X								
	Morgan Furniture Bldgs., Oxford, Ms.			X								X									X							
	Locker Rm. Bldg., Oxford, Ms.				X							X								X								
	2 store bldgs., Oxford, Ms.				X							X									X							
	Oxford Eagle Bldg., Oxford, Ms.			X								X									X							
	Farmland, Charleston, Ms.			X								X										X						
	Allied Signal stock	X									X								X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Jamie L. Whitten

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Signal Co.-Henley Group stock	x									x								x								
	Tallahatchie County, Ms. bank stock		x								x							x									
	Mfgrs. Hanover Trust Co., Pullman stock	x									x							x									
	Treasury Notes		x										x									x					
JT	Wright Patman Credit Union Accounts						x						x										x				
S	Pepsico stock		x								x								x								
S	1/2 int. in 145 acre farm, Lee County, Ms.		x									x						x									
S	1/3 int. in land, Lee County, Ms.		x															x									
S	1st Natl. Holding Co. stock, Oxford, Ms.		x								x								x								
S	Sunburst Bank , Charleston, Ms.		x										x							x							

Reporting Individual's Name

Jamie L. Whitten

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	NONE											

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	NONE								

4687

Reporting Individual's Name
Jamie L. Whitten

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135
NONE		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE ☐

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D.C. to Seattle, 3 days food & lodging, self and spouse	
NONE				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Jamie L. Whitten

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
NONE	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
NONE		

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Jamie L. Whitten	May 13, 1991

JAMIE L. WHITTEN
1ST DISTRICT, MISSISSIPPI
2314 HOUSE OFFICE BUILDING
(202) 225-4306

CHAIRMAN
COMMITTEE ON APPROPRIATIONS

Congress of the United States
House of Representatives
Washington, DC 20515

May 23, 1991

INSIDE MAIL

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1991 MAY 28 AM 7:37
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U.S. HOUSE OF REPRESENTATIVES

Hon. Louis Stokes, Chairman
Hon. James V. Hansen, Ranking Minority Member
Committee on Standards of Official Conduct
U.S. House of Representatives
Suite HT-2, The Capitol
Washington, D. C. 20515

MC (1)

Dear Colleagues:

I am writing in response to your May 17th request for additional information on my Financial Disclosure Statement.

Under Parts II and III, Assets and Unearned Income, the two store buildings listed are located on Court House Square in Oxford, Mississippi.

The house in Charleston, Mississippi, listed on previous Disclosure Statements, is my personal residence and, from a reading of page 13 of the April 1991 Instructions, need no longer be listed.

The farmland in Charleston, Mississippi, is approximately 240 acres. Charleston is in Tallahatchie County.

Also under Parts II and III, the Series HH Bonds and U.S. Savings Bonds were overlooked by my staff. They should still be listed as assets with a value of E for the Series HH bonds and a value of B for the Savings Bonds.

Trusting this information meets the requirements and with best wishes,

Sincerely,

Jamie Whitten

Jamie L. Whitten, M.C.

JLW:sa

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 3:59
U.S. HOUSE OF REPRESENTATIVES

Pat Williams
(Full Name)

2457 Rayburn
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Montana District: First	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED
MC (Office Use Only)

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$6,000	
Fairfax County Board of Education	Spouse Salary	N/A	
Brookings Institution (1/30/90, 2/8/90, 3/23/90, 5/5/90)	Speeches	$1,600	
Council for Advancement & Support of Education (2/28/90)	Speech	$ 500	
Coalition of Higher Education Assistance (2/12/90)	Speech	$1,000	
ASARCO (2/22/90)	Speech	$1,000	
National Education Association (3/3/90)	Speech	$1,000	
National Restaurant Association (3/18/90)	Speech	$1,000	
Mitchell Sweet & Associates (4/4/90)	Speech	$2,000	
Interstate Natural Gas Association (4/5/90)	Speech	$2,000	
Association of Independent Colleges & Schools (5/3/90)	Speech	$2,000	
Association of American Publishers (5/22/90)	Speech	$1,000	

For additional earned income, use next page

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Reporting Individual's Name
Pat Williams

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Hotel & Restaurant Workers (6/27/90)	Speech	$2,000	
Natl. Council of Educational Opportunity Assn. (9/18/90)	Speech	$2,000	
Americans United for Separation of Church & State (9/20/90)	Speech	$ 500	
Tribal Chairman's Association (10/14/90)	Speech	$1,000	
Chicago Mercantile Exchange (11/26/90)	Speech	$ 750	
Chicago Board of Trade (11/26/90)	Speech	$ 750	
MCA, Inc. (12/14/90)	Speech	$2,000	
The Connell Company (12/17/90)	Speech	$2,000	
Waste Management (12/20/90)	Speech	$2,000	
Peace Links (1/1/90 - 12/31/90)	Spouse Salary	NA	

Reporting Individual's Name
Pat Williams

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman Federal Credit Union Accounts, Washington, D.C.			X									X								X						
	First American, Maryland		X										X						X								
	Helena Abstract & Title Co., Helena MT (note Recievable from sale of house)			X									X								X						
	415 S. 6th E., Missoula, MT			X								X							X								
	Dean Witter Asset Fund		X										X						X								
	Templeton Global		X										X					X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Pat Williams

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Montana Board of Housing Bonds			X									X						X								
	Billings Storm Sewer Bonds		X										X					X									
	Billings Sanitary Sewer Bonds		X										X					X									
	Helena Urban Renewal Bonds		X										X					X									

Reporting Individual's Name
Pat Williams

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 17.

NONE [XX]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			
	Firemen's Fund	Mortgage on 415 S. 6th East, Missoula, Montana		X					

Reporting Individual's Name

Pat Williams

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Anthony Maglio, AGEM Golf Co. Novato, CA	Golf Club	$106.00
WETA-TV	Video Tapes - The Civil War (given to Flathead High School Kalispell, MT	$180.00

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
ASARCO	1/3-6/90	R/T Air Wash. DC to Tucson, 3 days food & lodging	
American Council for the Arts	1/30/90	R/T Air Wash. DC to NY, 1 nights lodging	
American Federation of Teachers	2/10-14/90	Air Hlna, MT to Miami to DC, 3 days meals & lodging	
National Education Assn	3/2-5/90	R/T Air, DC to Los Angeles	
National Restaurant Association	3/15-19/90	R/T Air, DC to San Francisco (stop in MT), 2 days meals & lodging for member and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Pat Williams

PART VI—TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

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NONE ☐

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

(CONTINUATION)

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

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Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Mitchell Sweet & Associates		3/23-26/90	R/T Air DC to Phoenix, 3 days meals & lodging, self & spouse	
Interstate Natural Gas Association		4/6-9/90	R/T Air DC to Ft. Meyers, FL, 3 days meals & lodging, self & spouse	
Chicago Mercantile Exchange		11/26/90	R/T Air DC to Chicago	
Waste Management		12/20/90	Air, Chicago to DC, 1 day meal & lodging	
MCA Inc.		12/13-15/90	R/T Air, DC to LA to NY 2 days meals & lodging, self & spouse	
Connell Sugar Co.		12/15-17/90	Air, NY to DC, 2 days meals & lodging, self & spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

Reporting Individual's Name

Pat Williams

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [XX]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [XX]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [XX] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Inctructions page 5.) Yes [ ] No [XX] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Pat Williams

DATE (Month, Day, Year): May 15, 1991

GPO 1991 37-598 (m)

4698

MAJORITY DEPUTY WHIP

COMMITTEES
STEERING AND POLICY
INTERIOR
EDUCATION AND LABOR
CHAIRMAN
LABOR-MANAGEMENT RELATIONS
SUBCOMMITTEES
POSTSECONDARY EDUCATION
ELEMENTARY SECONDARY AND VOCATIONAL EDUCATION
SELECT EDUCATION
NATIONAL PARKS AND PUBLIC LANDS

PAT WILLIAMS
MONTANA, WESTERN DISTRICT

Congress of the United States
House of Representatives
Washington, DC 20515

2457 RAYBURN BUILDING
WASHINGTON, DC 20515
(202) 225-3211

DISTRICT OFFICES

HELENA 59601
32 N. LAST CHANCE GULCH
(406) 443-7878

BUTTE 59701
FINLEN COMPLEX
(406) 723-4404

MISSOULA 59802
302 WEST BROADWAY
(406) 549-5550

(1)

MC

HAND DELIVERED

May 29, 1991

Clerk
U.S. House of Representatives
1036 Longworth
Washington, DC 20515

Dear Sir:

This letter will amend my 1990 Financial Disclosure Statement to include the following information:

Part IV. Transactions

Billings Sanitary Sewer Bonds, new holding purchased 11/27/90

Helena Urban Renewal Bonds, new holding purchased 8/28/90

My thanks for your attention to this matter.

Best regards.

Sincerely,

Pat Williams

Pat Williams

THIS STATIONERY PRINTED ON PAPER MADE WITH RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 6:00
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Charles Wilson
(Full Name)

2256 Rayburn HOB
(Mailing Address)

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: Texas, District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

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NONE [ ]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	BEI Defense Systems Company, Inc. (2/5/90)	Speech	2,000	
	Bell Helicopter (2/15/90)	Speech/Plant tour	2,000	
	LTV Aerospace and Defense Company (2/15/90)	Speech/Plant tour	2,000	
	Texas Instruments (2/16/90)	Speech/Plant tour	2,000	
	E-Systems, Inc. (2/16/90)	Speech/Plant tour	2,000	
	Hydraulic Institute (2/19/90)	Speech	2,000	
	Talley Defense Systems (2/19/90)	Speech	2,000	
	Honeywell (2/20/90)	Plant tour	1,000	
	TRW, Inc. (2/21/90)	Speech	2,000	
	Rockwell International (2/21/90)	Plant tour	2,000	

For additional earned income, use next page

4700

Reporting Individual's Name

Charles Wilson

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Northrop (2/22/90)	Speech/Plant tour	2,000	
The Marquardt Company (2/23/90)	Speech	2,000	
Technology Forum (2/28/90)	Speech	500	X
The New York Times (5/12/90)	Article	75	
Brown & Root Corporate Services, Inc. (5/31/90)	Speech	2,000	
District 2 MEBA AMO Vacation Plan (6/11/90)	Speech	2,000	$225
Shipbuilders Council of America (9/25/90)	Speech	1,000	x
Employees Retirement System (State of Texas)	Pension	21,797	

Reporting Individual's Name

Charles Wilson

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Southside National Bank Stock		X															X (none)									
	Pine Tree Resources					X							X	X								X		X			X

For additional assets and unearned income, use next page

4702

Reporting Individual's Name: Charles Wilson

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Pine Tree Resources		x		1/15/90			x				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				x			
	NCNB Texas, Lufkin, TX	Personal loan		x					
	First Bank & Trust, Diboll, TX	Personal loan		x					
	Fredonia State Bank, Nacogdoches, TX	Personal loan		x					

4703

Reporting Individual's Name: Charles Wilson

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Texas Instruments/Bell Helicopter/ LTV/E-Systems	2/14-18/90	Dallas, TX, 4 days food & lodging (split four ways)	
Allied Signal Aerospace Co.	2/18-20/90	Air fare,Houston/Dallas/Phoenix/L.A., 2 days food & lodging	
TRW/Rockwell International/ Marquardt Corp.	2/21-25/90	Air fare,L.A./Wash.D.C., 5 days food & lodging (split 3 ways)	
Rooney Group International	4/1-3/90	Air fare,Houston/Boston/Wash.D.C., 2 days food & lodging	
The Connell Company	9/28-30/90	Roundtrip air from Wash. D.C. to N.Y., 2 days food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Charles Wilson

Continuation Sheet

Part VII - "REIMBURSEMENT" AND GIFTS OF TRANSPORTATION, LODGING, FOOD AND ENTERTAINMENT

Scepter Manufacturing LTD	11/16-19/90	Roundtrip air from Wash. D.C. to Toronto, 3 days food and lodging

Reporting Individual's Name: Charles Wilson

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Board of Directors	Kennedy Center for the Performing Arts
Board of Directors	U.S. Naval Academy

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☐ NA ☒

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Charles Wilson	March 15, 1991

GPO 1991 37-598 (m)

4706

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2 56

HAND DELIVERED

ROBERT E. WISE, JR.
(Full Name)

1421 LONGWORTH BUILDING
(Mailing Address)

WASHINGTON, DC 20515

Filer Status	X Member of the U S House of Representatives	State WEST VIRGINIA District 3rd	Officer or Employee	Employing Office
Report Type	X Annual (May 15)	Amendment	Termination	Termination Date

MC (Office Use Only) 14

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE ☐

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	U.S. House of Representatives	Spouse Salary	NA	
	American Public Transit Association, Wash., DC (3-23-90)	Speech	$1,000.	X
	Associated General Contractors of America, Wash., DC (4-16-90)	Speech	$2,000.	X
	National Agricultural Chemicals Association, Wash., DC (4-16-90)	Speech	$ 500.	X
	County Natwest, Inc., New York, NY (5-10-90)	Speech	$1,500.	X
	LTV Aerospace and Defense Company, Dallas, TX (12-3-90)	Speech	$2,000.	X

For additional earned income, use next page 1990 Personal Income Form Attached

4707

Reporting Individual's Name

ROBERT E. WISE, JR.

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Wright Patman FCU Accounts, aggregated		X										X							X							
	Delaware Fund		X								X							X									

For additional assets and unearned income, use next page

4708

Reporting Individual's Name

ROBERT E. WISE, JR.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Wright Patman FCU	Personal loan	X						

4709

Reporting Individual's Name
ROBERT E. WISE, JR.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
General Motors Corporation	Civil War series set of video tapes	$120.
NOTE: At the present time the set of tapes is maintained in the Washington office of Congressman Wise in order to make them available for educational purposes.		

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Associated General Contractors of America	Mar 16-19,	1990 Roundtrip Air from Wash.,DC to San Francisco, and room	
Young Democrats of North Carolina	Mar 31, 1990	Room in Raleigh, NC for self and spouse	
WV State Health Education Council	Apr 22, 1990	Rooms in Canaan Valley, WV for self and staff	
WV Rural Water Association Conf.	Nov 8, 1990	Room at Pipestem State Park, WV	
Japan Society & Japan Center for Internat'l. Exchange	Nov 14-18, 1990	Roundtrip Air from Wash., DC to Tokyo, 3 days food & lodging	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
ROBERT E. WISE, JR.

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Director	West Virginia First, Inc.
Ex Officio Member, Board of	Directors, National Institute of Chemical Studies
Ex Officio Member, Board of	Directors, Regional Contracting Assistance Center, Inc.

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No [X] NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No [X] NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Robert E. Wise Jr.

DATE (Month, Day, Year): May 14, 1991

GPO 1991 37-598 (m)

4712

FORM **1040** Department of the Treasury – Internal Revenue Service

U.S. Individual Income Tax Return 1990

For the year Jan.–Dec. 31, 1990, or other tax year beginning , 1990, ending , 19 OMB No. 1545-0074

Label (See instructions on page 8.) Use IRS label. Otherwise, please print or type.

LABEL HERE

Your first name and initial: BOB WISE	Last name:
Your social security number: 233-78-6863	
If a joint return, spouse's first name and initial: SANDRA C. WISE	Last name:
Spouse's social security number: 474-50-2621	
Home address (number and street). (If you have a P.O. box, see page 9.): 101 GABE ROAD	Apt. no.
City, town or post office, state, and ZIP code. (If you have a foreign address, see page 9.): CLENDENIN, WV 25045	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Presidential Election Campaign (See page 9.)

Do you want $1 to go to this fund? Yes [ ] No [X]

If joint return, does your spouse want $1 to go to this fund? Yes [ ] No [X]

NOTE: Checking "Yes" will not change your tax or reduce your refund.

Filing Status Check only one box.

1 [ ] Single. (See page 10 to find out if you can file as head of household.)

2 [X] Married filing joint return (even if only one had income)

3 [ ] Married filing separate return. Enter spouse's social security no. above and full name. ▶

4 [ ] Head of household (with qualifying person). (See page 10.) If the qualifying person is your child but not your dependent, enter this child's name here. ▶

5 [ ] Qualifying widow(er) with dependent child (year spouse died ▶ 19). (See page 10.)

Exemptions (See instructions on page 10.)

6a [X] **Yourself** If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2.

b [X] **Spouse**

No. of boxes checked on 6a and 6b: 2

c **Dependents:**

(1) Name (first, initial, and last name)	(2) Check if under age 2	(3) If age 2 or older, dependent's social security number	(4) Dependent's relationship to you	(5) No. of mos. lived in your home in 1990
ROBERT W. WISE		236-33-9411	CHILD	12
ALEXANDRA S. WISE	X	579-17-4278	CHILD	12

If more than 6 dependents, see instructions on page 11.

No. of your children on 6c who: • lived with you 2 • didn't live with you due to divorce or separation (see page 11)

No. of other dependents on 6c

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ▶ [ ]

e Total number of exemptions claimed — Add numbers entered on lines above ▶ 4

Income Attach Copy B of your Forms W-2, W-2G, and W-2P here. If you do not have a W-2, see page 8. Attach check or money order on top of any Forms W-2, W-2G, and W-2P.

7	Wages, salaries, tips, etc. (attach Form(s) W-2)	7	174,574
8a	Taxable interest income (also attach Schedule B if over $400)	8a	1,214.
b	Tax-exempt interest income (see page 13). DON'T include on line 8a — 8b		
9	Dividend income (also attach Schedule B if over $400)	9	93.
10	Taxable refunds of state and local income taxes, if any, from worksheet on page 14	10	732.
11	Alimony received	11	
12	Business income or (loss) (attach Schedule C)	12	
13	Capital gain or (loss) (attach Schedule D)	13	
14	Capital gain distributions not reported on line 13 (see page 14)	14	31.
15	Other gains or (losses) (attach Form 4797)	15	
16a	Total IRA distributions — 16a — 16b Taxable amount (see page 14)	16b	
17a	Total pensions and annuities — 17a — 17b Taxable amount (see page 14)	17b	
18	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	18	
19	Farm income or (loss) (attach Schedule F)	19	
20	Unemployment compensation (insurance) (see page 16)	20	
21a	Social security benefits — 21a — 21b Taxable amount (see page 16)	21b	
22	Other income (list type and amount—see page 16) Honoraria	22	7,000.
23	Add the amounts shown in the far right column for lines 7 through 22. This is your **total income** ▶	23	183,644.

Adjustments to Income (See instructions on page 17.)

24a	Your IRA deduction, from applicable worksheet on page 17 or 18	24a	
b	Spouse's IRA deduction, from applicable worksheet on page 17 or 18	24b	
25	One-half of self-employment tax (see page 18)	25	
26	Self-employed health insurance deduction, from worksheet on page 18	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid. Recipient's SSN ▶	29	
30	Add lines 24a through 29. These are your **total adjustments** ▶	30	NONE

Adjusted Gross Income

31 Subtract line 30 from line 23. This is your **adjusted gross income.** If this amount is less than $20,264 and a child lived with you, see page 23 to find out if you can claim the "Earned Income Credit" on line 57 — 31: 183,644.

Form 1040 (1990) BOB WISE & SANDRA C. WISE 233-78-6863 Page 2

Tax Computation If you want IRS to figure your tax, see Instructions on page 19.	32	Amount from line 31 (adjusted gross income)	32	183,644
	33a	Check if: ☐ You were 65 or older ☐ Blind; ☐ Spouse was 65 or older ☐ Blind. Add the number of boxes checked above and enter the total here ▶ 33a		
	b	If your parent (or someone else) can claim you as a dependent, check here ▶ 33b ☐		
	c	If you are married filing a separate return and your spouse itemizes deductions, or you are a dual-status alien, see page 19 and check here ▶ 33c ☐		
	34	Enter the larger of: • Your standard deduction (from the chart (or worksheet) on page 20 that applies to you), OR • Your itemized deductions (from Schedule A, line 27). If you itemize, attach Schedule A and check here ▶ ☒	34	62,701.
	35	Subtract line 34 from line 32	35	120,943.
	36	Multiply $2,050 by the total number of exemptions claimed on line 6e	36	8,200.
	37	**Taxable Income.** Subtract line 36 from line 35 (If line 36 is more than line 35, enter -0-)	37	112,743
	38	Enter tax. Check if from: a ☐ Tax Table, b ☒ Tax Rate Schedules, or c ☐ Form 8615 (See page 21). (If any is from Form(s) 8814, enter that amount here ▶ d _____)	38	29,067.
	39	Additional taxes (see page 21). Check if from a ☐ Form 4970 b ☐ Form 4972	39	
	40	Add lines 38 and 39 ▶	40	29,067.
Credits (See Instructions on page 21.)	41	Credit for child and dependent care expenses (attach Form 2441) — 41: 960.		
	42	Credit for the elderly or the disabled (attach Schedule R) — 42		
	43	Foreign tax credit (attach Form 1116) — 43		
	44	General business credit. Check if from: a ☐ Form 3800 or b ☐ Form (specify) _____ — 44		
	45	Credit for prior year minimum tax (attach Form 8801) — 45		
	46	Add lines 41 through 45	46	960.
	47	Subtract line 46 from line 40 (If line 46 is more than line 40, enter -0-) ▶	47	28,107.
Other Taxes	48	Self-employment tax (attach Schedule SE)	48	
	49	Alternative minimum tax (attach Form 6251)	49	
	50	Recapture taxes (see page 22). Check if from a ☐ Form 4255 b ☐ Form 8611	50	
	51	Social security tax on tip income not reported to employer (attach Form 4137)	51	
	52	Tax on an IRA or a qualified retirement plan (attach Form 5329)	52	
	53	Advance earned income credit payments, from Form W-2	53	
	54	Add lines 47 through 53. This is your total tax ▶	54	28,107.
Payments Attach Forms W-2, W-2G, and W-2P to page 1.	55	Federal income tax withheld (If any is from Form(s) 1099, check ▶ ☐) — 55: 37,235.		
	56	1990 estimated tax payments and amount applied from 1989 return — 56		
	57	Earned income credit (see page 23) — 57		
	58	Amount paid with Form 4868 (extension request) — 58		
	59	Excess social security tax and RRTA tax withheld (see page 24) — 59		
	60	Credit for Federal tax on fuels (attach Form 4136) — 60		
	61	Regulated investment company credit (attach Form 2439) — 61		
	62	Add lines 55 through 61. These are your total payments ▶	62	37,235.
Refund or Amount You Owe	63	If line 62 is larger than line 54, enter amount OVERPAID ▶	63	9,128.
	64	Amount of line 63 to be REFUNDED TO YOU ▶	64	9,128.
	65	Amount of line 63 to be APPLIED TO YOUR 1991 ESTIMATED TAX ▶ 65		
	66	If line 54 is more than line 62, enter AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1990 Form 1040" on it	66	NONE
	67	Estimated tax penalty (see page 25) — 67: NONE		

Sign Here (Keep a copy of this return for your records.)

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation
		CONGRESSMAN
Spouse's signature (if joint return, BOTH must sign)	Date	Spouse's occupation
		ATTORNEY

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed	Preparer's social security no.
Teresa P. Chegwidden	4-2-91	☒	205-34-9306

Firm's name (or yours, if self-employed) and address: TERESA P. CHEGWIDDEN, CPA; P. O. BOX 2852; CHARLESTON, WV

E I No 55-0633379

ZIP code 25330-2852

F 12/20/90

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service

Schedule A—Itemized Deductions

▶ Attach to Form 1040. ▶ See Instructions for Schedules A and B (Form 1040).

OMB No. 1545-0074

1990

Attachment Sequence No. 07

Name(s) shown on Form 1040: Bob & Sandra C. WISE

Your social security number: 233 : 78 : 6863

Medical and Dental Expenses		**Caution:** *Do not include expenses reimbursed or paid by others.*			
	1	Medical and dental expenses. (See page 27 of the Instructions.)	1		
	2	Enter amount from Form 1040, line 32 . 2 183,644.			
	3	Multiply the amount on line 2 by 7.5% (.075). Enter the result	3	13,773	
	4	Subtract line 3 from line 1. Enter the result. If less than zero, enter -0- ▶			4 NONE
Taxes You Paid (See Instructions on page 27.)	5	State and local income taxes	5	12,035.	
	6	Real estate taxes	6	2,658.	
	7	Other taxes. (List—include personal property taxes.) ▶ P.P. tax - 184.	7	184.	
	8	Add the amounts on lines 5 through 7. Enter the total ▶			8 14,877.
Interest You Paid (See Instructions on page 27.)	9a	Deductible home mortgage interest paid to financial institutions and reported to you on Form 1098. Report deductible points on line 10	9a	31,714.	
	b	Other deductible home mortgage interest. (If paid to an individual, show that person's name and address.) ▶	9b		
	10	Deductible points. (See Instructions for special rules.)	10	255.	
	11	Deductible investment interest (attach Form 4952 if required). (See page 28.)	11		
	12a	Personal interest you paid. (See page 28.) 12a 1,748.			
	b	Multiply the amount on line 12a by 10% (.10). Enter the result	12b	175.	
	13	Add the amounts on lines 9a through 11, and 12b. Enter the total ▶			13 32,144.
Gifts to Charity (See Instructions on page 29.)		**Caution:** *If you made a charitable contribution and received a benefit in return, see page 29 of the Instructions.*			
	14	Contributions by cash or check	14	10,370.	
	15	Other than cash or check. (You **MUST** attach Form 8283 if over $500.)	15	399.	
	16	Carryover from prior year	16		
	17	Add the amounts on lines 14 through 16. Enter the total ▶			17 10,769.
Casualty and Theft Losses	18	Casualty or theft loss(es) (attach Form 4684). (See page 29 of the Instructions.) ▶			18
Moving Expenses	19	Moving expenses (attach Form 3903 or 3903F). (See page 30 of the Instructions.) ▶			19
Job Expenses and Most Other Miscellaneous Deductions (See Instructions on page 30 for expenses to deduct here.)	20	Unreimbursed employee expenses—job travel, union dues, job education, etc. (You **MUST** attach Form 2106 if required. See Instructions.) ▶	20	* 3,000.	
	21	Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶ * Total reflects $3,000. Statutory Limitation per IRC 162(a) for D.C. Living Expenses for Members of Congress	21	5,584.	
	22	Add the amounts on lines 20 and 21. Enter the total	22		
	23	Enter amount from Form 1040, line 32 . 23 183,644			
	24	Multiply the amount on line 23 by 2% (.02). Enter the result	24	3,673.	
	25	Subtract line 24 from line 22. Enter the result. If less than zero, enter -0- ▶			25 4,911
Other Miscellaneous Deductions	26	Other (from list on page 30 of Instructions). List type and amount ▶			26 NONE
Total Itemized Deductions	27	Add the amounts on lines 4, 8, 13, 17, 18, 19, 25, and 26. Enter the total here. Then enter on Form 1040, line 34, the **LARGER** of this total or your standard deduction from page 20 of the Instructions ▶			27 62,701.

For Paperwork Reduction Act Notice, see Form 1040 Instructions.

Schedule A (Form 1040) 1990

Name(s) shown on Form 1040. (Do not enter name and social security number if shown on other side.) Bob & Sandra C. WISE

Your social security number 233 78 6863

Schedule B—Interest and Dividend Income

Attachment Sequence No 08

Part I Interest Income

(See Instructions on pages 13 and 30.)

If you received more than $400 in taxable interest income, or you are claiming the exclusion of interest from series EE U.S. savings bonds issued after 1989 (see page 31), you must complete Part I. List ALL interest received in Part I. If you received more than $400 in taxable interest income, you must also complete Part III. If you received, as a nominee, interest that actually belongs to another person, or you received or paid accrued interest on securities transferred between interest payment dates, see page 31.

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement, from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Interest Income		Amount
1 Interest income. (List name of payer—if any interest income is from seller-financed mortgages, see Instructions and list that interest first.) ▶ Credit Union a/c 64061	1	221
69491		244
68392		89
62497		660
2 Add the amounts on line 1. Enter the total	2	1,214.
3 Enter the excludable savings bond interest, if any, from Form 8815, line 14. Attach Form 8815 to Form 1040	3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ▶	4	1,214.

Part II Dividend Income

(See Instructions on pages 13 and 31.)

If you received more than $400 in gross dividends and/or other distributions on stock, you must complete Parts II and III. If you received, as a nominee, dividends that actually belong to another person, see page 31.

Note: If you received a Form 1099-DIV, or substitute statement, from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

Dividend Income		Amount
5 Dividend income. (List name of payer—include on this line capital gain distributions, nontaxable distributions, etc.) ▶	5	
6 Add the amounts on line 5. Enter the total	6	
7 Capital gain distributions. Enter here and on Schedule D* 7		
8 Nontaxable distributions. (See the Inst. for Form 1040, line 9.) 8		
9 Add the amounts on lines 7 and 8. Enter the total	9	
10 Subtract line 9 from line 6. Enter the result here and on Form 1040, line 9 ▶	10	

**If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the Instructions for Form 1040, lines 13 and 14.*

Part III Foreign Accounts and Foreign Trusts

(See Instructions on page 31.)

If you received more than $400 of interest or dividends, OR if you had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must answer both questions in Part III.

	Yes	No
11a At any time during 1990, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See page 31 of the Instructions for exceptions and filing requirements for Form TD F 90-22.1.)		X
b If "Yes," enter the name of the foreign country ▶		
12 Were you the grantor of, or transferor to, a foreign trust that existed during 1990, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926		X

Form **2106**

Department of the Treasury
Internal Revenue Service

Employee Business Expenses

▶ See separate instructions.

▶ Attach to Form 1040.

OMB No. 1545-0139

1990

Attachment Sequence No. 54

Your name	Social security number	Occupation in which expenses were incurred
BOB WISE	233-78-6863	Congressman

Part I **Employee Business Expenses and Reimbursements**

STEP 1 Enter Your Expenses		Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1	542.	
2 Parking fees, tolls, and local transportation, including train, bus, etc.	2	25.	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. **Do not** include meals and entertainment	3		
4 Business expenses not included on lines 1 through 3. **Do not** include meals and entertainment	4	1,544.	
5 Meals and entertainment expenses. (See the separate instructions.)	5		719.
6 Add lines 1 through 5 and enter the **total expenses** here	6	2,111.	719.

Note: *If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.*

STEP 2 Enter Amounts Your Employer Gave You For Expenses Listed In STEP 1

7 Enter amounts your employer gave you that were **not** reported to you in Box 10 of Form W-2. Include any amount reported under code "L" in Box 17 of your Form W-2. (See Instructions.)	7	148.	

STEP 3 Figure Expenses To Deduct on Schedule A (Form 1040)

8 Subtract line 7 from line 6	8	1,963.	719.
Note: *If **both columns** of line 8 are zero, **stop here.** If column A is less than zero, report the amount as income and enter -0- on line 10, column A. See the separate instructions for how to report.*			
9 Enter 20% (.20) of line 8, Column B	9		144.
10 Subtract line 9 from line 8	10	1,963.	575.
11 Add the amounts on line 10 of both columns and enter the total here. **Also enter the total on Schedule A (Form 1040), line 20.** (Qualified performing artists and individuals with disabilities, see the separate instructions for special rules on where to enter the total.) ▶	11		2,538.

For Paperwork Reduction Act Notice, see the separate instructions.

Form **2106** (1990)

Form 2106 (1990) BOB WISE 233-78-6863 Page 2

Part II Vehicle Expenses (See Instructions to find out which sections to complete.)

Section A.—General Information		(a) Vehicle 1	(b) Vehicle 2
12 Enter the date vehicle was placed in service	12	12-1-85	
13 Total mileage vehicle was used during 1990	13	14,628. miles	miles
14 Miles included on line 13 that vehicle was used for business	14	2,083. miles	miles
15 Percent of business use (divide line 14 by line 13)	15	14. %	%
16 Average daily round trip commuting distance	16	20. miles	miles
17 Miles included on line 13 that vehicle was used for commuting	17	5,000. miles	miles
18 Other personal mileage (add lines 14 and 17 and subtract the total from line 13)	18	7,545. miles	miles

19 Do you (or your spouse) have another vehicle available for personal purposes? [X] Yes [ ] No

20 If your employer provided you with a vehicle, is personal use during off duty hours permitted? [ ] Yes [ ] No [X] Not applicable

21a Do you have evidence to support your deduction? [X] Yes [ ] No 21b If "Yes," is the evidence written? [X] Yes [ ] No

Section B.—Standard Mileage Rate (Use this section only if you own the vehicle.)

22 Multiply line 14 by 26¢ (.26). Enter the result here and on line 1 (Rural mail carriers, see the separate Instructions.) 22

Section C.—Actual Expenses		(a) Vehicle 1	(b) Vehicle 2
23 Gasoline, oil, repairs, vehicle insurance, etc.	23		
24a Vehicle rentals	24a		
b Inclusion amount	24b		
c Subtract line 24b from line 24a	24c		
25 Value of employer-provided vehicle (applies only if 100% annual lease value was included on Form W-2. See Instructions.)	25		
26 Add lines 23, 24c, and 25	26		
27 Multiply line 26 by the percentage on line 15	27		
28 Enter amount from line 38 below	28		
29 Add lines 27 and 28. Enter total here and on line 1	29		

Section D.—Depreciation of Vehicles (Use this section only if you own the vehicle.)

		(a) Vehicle 1	(b) Vehicle 2
30 Enter cost or other basis. (See Instructions.)	30		
31 Enter amount of Section 179 deduction. (See Instructions.)	31		
32 Multiply line 30 by line 15. (See Instructions if you elected the Section 179 deduction.)	32		
33 Enter depreciation method and percentage. (See Instructions.)	33		
34 Multiply line 32 by the percentage on line 33. (See Instructions.)	34		
35 Add lines 31 and 34	35		
36 Enter the limitation amount from the table in the line 36 instructions.	36		
37 Multiply line 36 by the percentage on line 15.	37		
38 Enter the smaller of line 35 or line 37. Also enter it on line 28 above.	38		

Form **2106**

Department of the Treasury
Internal Revenue Service (0)

Employee Business Expenses

▶ See separate instructions.

▶ Attach to Form 1040.

OMB No. 1545-0139

1990

Attachment Sequence No. 54

Your name	Social security number	Occupation in which expenses were incurred
SANDRA CASBER WISE	474 : 50 : 2621	Attorney, House of Rep.

Part I **Employee Business Expenses and Reimbursements**

STEP 1 Enter Your Expenses		Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and local transportation, including train, bus, etc.	2	10.	
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. **Do not** include meals and entertainment	3		
4 Business expenses not included on lines 1 through 3. **Do not** include meals and entertainment	4	339.	
5 Meals and entertainment expenses. (See the separate Instructions.)	5		
6 Add lines 1 through 5 and enter the **total expenses** here	6	349.	

Note: *If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.*

STEP 2 Enter Amounts Your Employer Gave You For Expenses Listed In STEP 1

7 Enter amounts your employer gave you that were **not** reported to you in Box 10 of Form W-2. Include any amount reported under code "L" in Box 17 of your Form W-2. (See Instructions.)	7		

STEP 3 Figure Expenses To Deduct on Schedule A (Form 1040)

8 Subtract line 7 from line 6	8	349.	
Note: *If **both columns** of line 8 are zero, **stop here.** If column A is less than zero, report the amount as income and enter -0- on line 10, column A. See the separate Instructions for how to report.*			
9 Enter 20% (.20) of line 8, Column B	9		
10 Subtract line 9 from line 8	10	349.	
11 Add the amounts on line 10 of both columns and enter the total here. **Also enter the total on Schedule A (Form 1040), line 20.** (Qualified performing artists and individuals with disabilities, see the separate instructions for special rules on where to enter the total.) ▶	11		349.

For Paperwork Reduction Act Notice, see the separate Instructions.

Form **2106** (1990)

Form **2441**
Department of the Treasury
Internal Revenue Service

Child and Dependent Care Expenses

▶ Attach to Form 1040.
▶ See separate instructions.

OMB No. 1545-0074
1990
Attachment Sequence No. 21

Name(s) shown on Form 1040: BOB WISE & SANDRA C. WISE

Your social security number: 233-78-6863

- If you are claiming the child and dependent care credit, complete Parts I and II below. But if you received employer-provided dependent care benefits, first complete Part III on page 2.
- If you are not claiming the credit but you received employer-provided dependent care benefits, only complete Part I, below, and Part III on page 2.

Part I **Persons or Organizations Who Provided the Care - You must complete this part.** (See the instructions. If you need more space, attach a statement.)

1 (a) Name	(b) Address (number, street, city, state, and ZIP code)	(c) Identification number (SSN or EIN)	(d) Amount paid (see instructions)
House of Representative Child Care Center	501 First St., SE Washington, DC 20003	52-1485188	13,816.

2 Add the amounts in column (d) of line 1 and enter the total . . . . . 2 13,816.

Note: If you paid cash wages of $50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get Form 942 for details.

Part II **Credit for Child and Dependent Care Expenses**

3 Enter the number of qualifying persons who were cared for in 1990. (See the instructions for the definition of qualifying persons.) **Caution:** To qualify, the person(s) must have shared the same home with you in 1990. . . . . ▶ 2

4 Enter the amount of **qualified** expenses you incurred and actually paid in 1990. See the instructions to find out which expenses qualify. **Caution:** If you completed Part III on page 2, do not include on this line any excluded benefits shown on line 25 . . . . . 4 13,816.

5 Enter $2,400 ($4,800 if you paid for the care of two or more qualifying persons) . . . . . 5 4,800.

6 If you completed Part III on page 2, enter the **excluded benefits**, if any, from line 25 6

7 Subtract line 6 from line 5 and enter the result. (If the result is zero or less, skip lines 8 through 13. Enter zero on line 14, and go to line 15.) . . . . . 7 4,800.

8 Compare the amounts on lines 4 and 7. Enter the **smaller** of the two amounts here . . . . . 8 4,800.

9 You must enter your **earned income.** (See the instructions for the definition of earned income.) . . . . . 9 97,646.

10 If you are married filing a joint return, you must enter your spouse's earned income. (If your spouse was a full-time student or disabled, see the instructions for the amount to enter.) . . . . . 10 83,928.

11 If you are married filing a joint return, compare the amounts on lines 9 and 10. Enter the **smaller** of the two amounts here . . . . . 11 83,928.

12 • If you are married filing a joint return, compare the amounts on lines 8 and 11. Enter the **smaller** of the two amounts here.
• All others, compare the amounts on lines 8 and 9. Enter the **smaller** of the two amounts here. . . . . 12 4,800.

13 Enter the decimal amount from the table below that applies to the **adjusted gross income** on Form 1040, line 32 . . . . . 13 .20 x

If line 32 is: Over —	But not over —	Decimal amount is:	If line 32 is: Over —	But not over —	Decimal amount is:
$0	10,000	.30	$20,000	22,000	.24
10,000	12,000	.29	22,000	24,000	.23
12,000	14,000	.28	24,000	26,000	.22
14,000	16,000	.27	26,000	28,000	.21
16,000	18,000	.26	28,000		.20
18,000	20,000	.25			

14 Multiply the amount on line 12 by the decimal amount on line 13 and enter the result 14 960

15 Multiply any child and dependent care expenses for 1989 that you paid in 1990 by the decimal amount that applies to the adjusted gross income on your 1989 Form 1040, line 32, or Form 1040A, line 14. Enter the result. (You must complete Part I and attach a statement. See the instructions.) 15

16 Add the amounts on lines 14 and 15. See the instructions for the amount of credit you can claim 16 960

For Paperwork Reduction Act Notice, see separate instructions.

Form **2441** (1990)

H807

F 01/07/91

Form **6251**

Department of the Treasury
Internal Revenue Service

Alternative Minimum Tax—Individuals

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1040NR. Estates and trusts, use Form 8656.

OMB No. 1545-0227

1990

Attachment Sequence No. 32

Name(s) shown on Form 1040: Bob & Sandra C. Wise

Your social security number:

1	Taxable income from Form 1040, line 37. (If Form 1040, line 37 is zero, see Instructions.)			1	112743.
2	Net operating loss deduction, if any, from Form 1040, line 22. (Enter as a positive amount.)			2	
3	Combine lines 1 and 2			3	112743.
4	**Adjustments:** (See Instructions before completing.)				
a	Standard deduction, if any, from Form 1040, line 34	4a			
b	Personal exemption amount from Form 1040, line 36	4b	8,200.		
c	Medical and dental expenses	4c			
d	Miscellaneous itemized deductions from Schedule A (Form 1040), line 25	4d	4,911.		
e	Taxes from Schedule A (Form 1040), line 8	4e	14,877.		
f	Refund of taxes	4f	(732.)		
g	Personal interest from Schedule A (Form 1040), line 12b	4g	175.		
h	Other interest adjustments	4h			
i	Reserved	4i			
j	Depreciation of tangible property placed in service after 1986	4j			
k	Circulation and research and experimental expenditures paid or incurred after 1986	4k			
l	Mining exploration and development costs paid or incurred after 1986	4l			
m	Long-term contracts entered into after 2/28/86	4m			
n	Pollution control facilities placed in service after 1986	4n			
o	Installment sales of certain property	4o			
p	Adjusted gain or loss	4p			
q	Certain loss limitations	4q			
r	Tax shelter farm loss	4r			
s	Passive activity loss	4s			
t	Beneficiaries of estates and trusts	4t			
u	Combine lines 4a through 4t			4u	27,431.
5	**Tax preference items:** (See Instructions before completing.)				
a	Appreciated property charitable deduction	5a			
b	Tax-exempt interest from private activity bonds issued after 8/7/86	5b			
c	Depletion	5c			
d	Accelerated depreciation of real property placed in service before 1987	5d			
e	Accelerated depreciation of leased personal property placed in service before 1987	5e			
f	Amortization of certified pollution control facilities placed in service before 1987	5f			
g	Intangible drilling costs	5g			
h	Add lines 5a through 5g			5h	NONE
6	Combine lines 3, 4u, and 5h			6	140,174
7	Alternative tax net operating loss deduction. (Do not enter more than 90% of line 6.) See Instructions			7	
8	Alternative minimum taxable income. Subtract line 7 from line 6. If married filing a separate return, see Instructions			8	140,174
9	Enter: $40,000 ($20,000 if married filing separately; $30,000 if single or head of household)			9	40,000.
10	Enter: $150,000 ($75,000 if married filing separately; $112,500 if single or head of household)			10	150,000.
11	Subtract line 10 from line 8. If zero or less, enter -0- here and on line 12 and go to line 13			11	-0-
12	Multiply line 11 by 25% (.25)			12	-0-
13	Subtract line 12 from line 9. If zero or less, enter -0-. If completing this form for a child under age 14, see Instructions for amount to enter			13	40,000.
14	Subtract line 13 from line 8. If zero or less, enter -0- here and on line 19 and skip lines 15 through 18			14	100,174
15	Multiply line 14 by 21% (.21)			15	21,037.
16	Alternative minimum tax foreign tax credit. See Instructions			16	
17	Tentative minimum tax. Subtract line 16 from line 15			17	21,037.
18	Enter your tax from Form 1040, line 38, minus any foreign tax credit on Form 1040, line 43. If an amount is entered on line 39 of Form 1040, see Instructions			18	29,067.
19	**Alternative minimum tax.** Subtract line 18 from line 17. If zero or less, enter -0-. Enter this amount on Form 1040, line 49. If completing this form for a child under age 14, see Instructions for amount to enter			19	-0-

For Paperwork Reduction Act Notice, see separate Instructions.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 3:06
U.S. H... ...

HAND DELIVERED

Frank R. Wolf
(Full Name)

1453 Hunter Mill Rd.
(Mailing Address)

Vienna, VA 22182

Filer Status	[X] Member of the U.S. House of Representatives	State Virginia District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 10

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

Frank R. Wolf

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)				Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
				A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
JT	Sovran Bank, CD				X										X						X								
JT	NVR Savings Bank accounts				X									X							X								
JT	United Savings Bank, CD			X											X						X								
DC	Franklin Income Fund				X								X									X							
JT	Franklin Virginia Fund				X								X								X								
JT	U.S. Savings Bonds				X																								

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Frank R. Wolf

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Franklin Income Fund, KEOGH				X																						
JT	Smith Barney IRA		X																								
JT	Oppenheimer IRA			X																							
S	MA Savings Bank Insurance Council																life ins. annuities		X								
S	Equitable Life Assurance Soc.																" "		X								
S	U.S. Treasury																" "		X								

Reporting Individual's Name
Frank R. Wolf

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

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Reporting Individual's Name
Frank R. Wolf

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE ☐

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
Radu Damaceanu, Washington, DC	Religious wood carving	$180

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE ☐

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle. 3 days food & lodging, self and spouse	
Congressional Institute, Wash, DC	Feb. 22-23, 1990	train 1 way airfare Wash., DC-Princeton, NJ; 1 day food & lodging; self & spouse	
International Foundation, Wash, DC	Feb. 10-18, 1990	Roundtrip airfare Wash., DC to Entebbe, Uganda; 3 days food & lodging; for spouse. See attached ltr. 2/8/90 & disclosure 5USC7342 (C) (1).	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name
Frank R. Wolf

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Frank R. Wolf	MAY 14, 1991

GPO 1991 37-

4726

ONE HUNDRED FIRST CONGRESS
JULIAN C. DIXON, CALIFORNIA, CHAIRMAN
VIC FAZIO, CALIFORNIA
BERNARD J. DWYER, NEW JERSEY
ALAN B. MOLLOHAN, WEST VIRGINIA
JOSEPH M. GAYDOS, PENNSYLVANIA
CHESTER G. ATKINS, MASSACHUSETTS
(202) 225-7103

U.S. House of Representatives
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, DC 20515

February 8, 1990

The Honorable Tony P. Hall
U.S. States House of Representatives
2448 Rayburn House Office Building
Washington, D.C. 20515

Dear Colleague:

This responds to your letter of January 25, 1990, requesting an advisory opinion from the Committee with respect to a trip your wife is planning to take with several other congressional wives to Uganda from February 10-18, 1990, at the request of Mrs. Janet Museveni, the wife of Ugandan President Yoweri Museveni. The invitation, a copy of which you enclosed with your letter, indicates that the purpose of this visit is for the group to see firsthand the orphan problems of that country and then to assist the Fellowship Foundation and World Vision in trying to ease conditions for these children by their testimony in this country. The invitation further indicates that all expenses for this trip would be jointly paid by the Fellowship Foundation and World Vision, both nonprofit organizations.

It is the responsibility of a traveling Member, employee, or spouse to determine whether the sponsor of a trip of this kind is a foreign government or agent thereof, or acting on behalf of a foreign government. The invitation indicates that the sponsors of this trip, Fellowship Foundation and World Vision, are nonprofit organizations. Therefore, for purposes of this advisory opinion letter, your wife's travel expenses are deemed not to be subject to the Foreign Gifts and Decorations Act (5 U.S.C. §7342).

The applicable House rule is Rule XLIII, clause 4, which, effective January 1, 1990, provides that a Member, officer, or employee of the House shall not accept in any calendar year gifts aggregating more than "minimal value," directly or indirectly, from any source other than a relative. In Advisory Opinion No. 9, the Select Committee on Ethics of the 95th Congress determined that gifts to a spouse or dependent of a Member are considered indirect gifts to the Member, unless such gift is prompted by some consideration unrelated to the recipient's relationship to the Member.

This Committee has recognized an exception to the gift rule for individuals who "substantially participate" in an event. The Select Committee on Ethics of the 95th Congress, in Advisory Opinion No. 2, stated that:

> . . . necessary expenses should not be considered to be a "gift" to a participating individual who renders personal services sufficient to constitute "equal consideration" for the expenses provided by the sponsoring organization.

The opinion goes on to point out that:

> . . . the services rendered must be more than perfunctory in nature to constitute equal consideration for the expenses involved. For example, addressing an audience at an event or engaging in discussion seminars would be considered substantial participation sufficient to constitute "equal consideration," while simply visiting a specific site or location as part of a "fact-finding tour" would probably not be viewed as "equal consideration" for expenses paid by a sponsoring organization.

Thus, if you determine that this trip is being offered to your wife totally independent of her relationship with you, or if your wife is performing services for the sponsors of the trip which constitute equal consideration for the travel provided, then acceptance of necessary expenses would not be deemed a gift for the purposes of House Rule XLIII, clause 4.

Section 805(a)(1) of the Ethics Reform Act of 1989 sets a ceiling on the expenses which will normally be deemed necessary for privately paid travel. In the case of foreign travel, a maximum of seven consecutive days (excluding travel days) may be accepted without prior written approval from the Committee. Your wife's proposed travel appears consistent with this limit.

Any such expenses incurred by your wife for travel which is not totally independent of her relationship with you, and which aggregate $250 or more in value from a single source, must be disclosed as "reimbursements" on the Financial Disclosure

Statement you file pursuant to the Ethics in Government Act of 1978. The Ethics Reform Act requires reporting not only the identity of the source of the travel but also a brief description, including a travel itinerary, dates, and nature of expenses provided.

If you have any further questions concerning this matter, please contact the Committee staff at extension 5-7103.

Sincerely,

Julian C. Dixon
Chairman

John T. Myers
Ranking Minority Member

JS:lrs

U.S. HOUSE OF REPRESENTATIVES

Form For Disclosing Gifts From Foreign Governments Pursuant To 5 U.S.C. 7342

I. NAME: Carolyn Wolf II. POSITION: wife of Congressman Frank Wolf

III. RECIPIENT (If other than reporting person):

IV. DESCRIPTION:

(1) Tangible gift(s) of more than minimal value.

(2) Decoration(s) of more than minimal intrinsic value.

(3) Travel provided by a Foreign Government. Hotel room and food provided by the government of Uganda for a period of 4 days. Estimate hotel costs of approximately $150 per day and food approximately $20 per day.

(4) Expenses for travel provided or reimbursed by a Foreign Government.

V. CIRCUMSTANCES JUSTIFYING ACCEPTANCE: Visiting Uganda at the request and as a guest of Mrs. Janet Museveni, wife of Ugandan President Yoweri Museveni. Acceptance of expenses outside of the United States is authorized by 5 USC 7342(C)(1).

VI. DATE OR DATES OF ACCEPTANCE (for travel give inclusive dates travel occurred): February 13 through February 16, 1990.

VII. DONOR GOVERNMENT (if items are received from more than one Foreign Government, use additional forms: Uganda

(1) Name and Position of individual who presented item: President and Mrs. Yoweri Museveni.

VIII. FOR TANGIBLE GIFTS OR DECORATIONS OF MORE THAN MINIMAL VALUE ONLY:

(1) Estimated value in United States at time of acceptance:

(2) Disposition or current location of accepted item(s).

Carolyn S. Wolf
Signature

March 12, 1990

FRANK R. WOLF
10TH DISTRICT, VIRGINIA

WASHINGTON OFFICE
104 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-5136

CONSTITUENT SERVICES OFFICES
1651 OLD MEADOW ROAD
SUITE 115
MCLEAN, VA 22102
(703) 734-1800

19 EAST MARKET STREET
LEESBURG, VA 22075
(703) 777-4422

METRO NUMBER
(703) 478-1303

HAND DELIVERED

1991 MAY 22 PM 3:49

Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEE ON APPROPRIATIONS
SUBCOMMITTEES
TRANSPORTATION
TREASURY, POSTAL SERVICE—GENERAL GOVERNMENT
SELECT COMMITTEE ON CHILDREN, YOUTH AND FAMILIES
SELECT COMMITTEE ON HUNGER
COMMISSION ON SECURITY AND COOPERATION IN EUROPE

May 22, 1991

MC

(1)

The Honorable Louis Stokes
U.S. House of Representatives
Washington, D.C. 20515

Dear Louis:

In response to your letter of May 16, 1991, requesting additional information about my KEOGH and IRA assets for my 1990 Financial Disclosure Statement, I submit the following amendment to Part III.

Franklin Income Fund, KEOGH:
Type of income: Dividends
Category of amount of income: V ($5,001-15,000)

Smith Barney IRA: National Liquid Reserves Retirement Portfolio:
Type of income: Dividends
Category of amount of income: II ($201-1,000)

Oppenheimer IRA: Regency Fund:
Type of income: Dividends and Capital Gains
Category of amount of income: II ($201-1,000)

Sincerely,

Frank R. Wolf
Member of Congress

FRW:sbt

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 11: 20

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

HOWARD WOLPE
(Full Name)

818 Seymour, Lansing, Michigan 48933
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State Michigan District Third	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1981, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	**Type**	**Amount**	**Mark (X) if directed or paid to charity**
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name
HOWARD WOLPE

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X							X								X
	George Wash. Credit Union Accounts			X									X							X						
	182 Main Street, Dover, Delaware				X							X							X							
	CONGRESSIONAL FEDERAL CREDIT UNION (SAVINGS)		X										X					Y								
	818 SEYMOUR, LANSING, MICHIGAN			X								X							X							
	CONGRESSIONAL FEDERAL CREDIT UNION (IRA)		X										X					Y								

For additional assets and unearned income, use next page

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Reporting Individual's Name

HOWARD WOLPE

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	CAPITAL FEDERAL SAVINGS, LANSING, MI.	MORTGAGE ON 818 SEYMOUR, LAN							
		MICHIGAN		X					

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Reporting Individual's Name

HOWARD WOLPE

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example:	Mrs. Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging self and spouse	
AIPAC (SPEECH)		1/30/90	ROUNDTRIP AIR FARE TO [illegible], FLORIDA (SELF)	
BALL STATE UNIVERSITY(LECTURE)		2/5/90	AIR FARE FROM DAYTON, OHIO TO [illegible] (SELF)	
NATIONAL JEWISH COMMUNITY RELATIONS ACTION COMMITTEE (LECTURE)		2/19/90	ROUNDTRIP AIR FARE TO [illegible] (SELF)	
HAMPSHIRE COLLEGE (LECTURE)		4/1-2/90	AIRFARE FROM D.C. TO SPRINGFIELD, MASS. TO LANSING, MI.	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

HOWARD WOLPE

PART VII _ CONTINUED

Aspen Institute Conference on South Africa	4/11-15 Roundtrip air fare to Bermuda 4 days food & lodging (self)

Reporting Individual's Name
HOWARD WOLPE

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] N/A [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] N/A [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Howard Wolpe	5-15-91

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:02
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Ronald L. Wyden
(Full Name)

2452 Rayburn House Office Bldg.
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State Oregon, District 3RD	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Attached		$26,000	
	Spouse - Dominion Psy Trmt Center	Fees	NA	
	Dominion Hospital		NA	

For additional earned income, use next page

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Reporting Individual's Name
Ronald L. Wyden

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year Specify any alternative valuation method

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left (This is optional) See instructions, page 14

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash Credit Union Accounts			X									X								X						
	182 Main Street Dover, Delaware				X							X								X							
	Laurie Wyden Trust					X					X		X										X				
	- 49% interest in Oseran Investment...real property at																										
	2337 NW 30th St. and 2740																										
	NW 22nd Pl., Portland.																										
	- 21% interest in Foster-Oseran																										
	real property at 817-821 2nd																										
	Ave., Portland; and 1320,																										
	1360 & 1370 Hill St., El Cajon,																										
	CA.																										

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ronald L. Wyden

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Riggs National Bank, D.C.				X								X									X					
	House, 2814 NE Knott, Portland, OR				X							X										X					
	U.S. Savings Bonds			X						Valuation at maturity			X														
	Oregon Baccalaureate Bonds					X				"			X								X						
	State of Israel Bonds		X							"																	

Reporting Individual's Name

Ronald L. Wyden

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

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Reporting Individual's Name
Ronald L. Wyden

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20–22

NONE [ ]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash D C to Chicago, and Lunch	
	ABC Corporation	Aug 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	
Attached				

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S C 7342)

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Reporting Individual's Name: Ronald L. Wyden

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [ ]

Positions	Name of Organization
Attached	

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.)

Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.)

Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). This Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies or willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Ron Wyden

DATE (Month, Day, Year): May 13, 1991

GPO: 1991 — 17-598 (m)

Hon. Ron Wyden -- 1990 Financial Disclosure
Section II, Honoraria

Group	$	recd.
American Electronics Association	1,000	11-16
American Medical Political Action Cmte.	1,000	4-11
American Paper Institute	1,000	5-21
American Society of Consultant Pharmacists	1,500	4-17
Atlantic Information Service	1,000	10-23
Chemical Specialties Manufacturers Assn.	500	10-15
Federation of American Health Systems	1,000	3-22
Metro Health Center	2,000	12-27
National Association of Broadcasters	1,000	6-26
National Association of Home Builders	2,000	3-6
National Association of Retail Druggists	1,500	5-25
National Association of Solvent Recyclers	1,500	4-26
National Council of Community Hospitals	2,000	3-28
National Medical Enterprises, Inc.	2,000	5-3
National Small Business United	1,000	5-14
Property & Casualty 12	500	2-14
R. Duffy Wall & Associates	1,000	3-5
Reed Smith Shaw & McClay	1,500	4-6
Reinsurance Association of America	2,000	5-8
University of Kansas	1,000	8-15
	$ 26,000	

Section VII, Reimbursements

Source	Brief Description
Metro Health Center	Airfare (DC-Erie-DC) + 1 night lodging
National Medical Enterprises	Airfare (DC-Orlando-DC) + 1 night lodging
Securities Industry Assn.	Airfare (PDX-DC) + 1 night lodging
S. Palm Beach County Jewish Federation	Airfare (DC-Ft.L-DC) + 1 night lodging

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Section VIII - Positions

Member, Board of Directors (uncompensated) Sight Savers International

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 12:26
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Chalmers Pangburn Wylie
(Full Name)

2310 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio, District: 15th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

Ma (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Ohio Chapter of American Instit. of Real Estate Appraisers	speech	$1,500.00	
	American Banker/Bond Buyer, New York, N.Y. (Jan. 10, 1990)	speech	$1,000.00	
	Securities Industry Assn, Boca Raton, Florida (Jan 19, 1990)	Speech	$2,000.00	
	Nat'l Assn of Home Builders, Atlanta, Georgia (Jan. 23, 1990)	Speech	$2,000.00	
	Edward D. Jones & Company, Wash, DC (Feb. 9, 1990)	Speech	$2,000.00	
	Assn. of Reserve City Bankers, Wash, DC (Feb. 16, 1990)	Speech	$2,000.00	
	U.S. League of Savings Instit., Wash, DC (March 6, 1990)	Speech	$2,000.00	
	Chicago Mercantile Exchange, Chicago, Illinois (March 21, 1990)	Speech	$ 750.00	
	Chicago Board of Trade, Chicago, Illinois (March 21, 1990)	Speech	$ 750.00	
	American Instit. of Real Estate Appraisers, Pitts., PA (March 28, 1990)	Speech	$1,500.00	

For additional earned income, use next page

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Reporting Individual's Name
Chalmers Pangburn Wylie

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Iowa Bankers Association, Wash, DC (April 24, 1990)	Speech	$1,000.00	
Public Securities Assn, Inc., White Sulphur Springs, VA (May 1, 1990)	Speech	$2,000.00	
American Banker/ Bond Buyer, Wash, DC (May 10, 1990)	Speech	$1,000.00	
Executive Enterprises, Wash, DC (June 7, 1990)	Speech	$2,000.00	
American Instit. of CPA's, Wash, DC (July 23, 1990)	Speech	$2,000.00	
Ashland Oil, Columbus, Ohio (Aug. 27, 1990)	Speech	$2,000.00	
A. B. Laffer/ V.A. Canto Associates, Wash, DC (Oct. 2, 1990)	Speech	$1,000.00	
Nat'l Assn. of Credit Union Presidents, St. Louis, Missouri (Oct. 18, 1990)	Speech	$ 500.00	
Nat'l Assn. of Realtors, New Orleans, Louisiana (Nov. 10, 1990)	Speech	$2,000.00	
Nationwide CAP, Columbus, Ohio (Nov. 15, 1990)	Speech	$1,500.00	
Securities Industry Assn., Boca Raton, Florida (Dec. 1, 1990)	Speech	$2,000.00	
Ohio Chapter of American Instit.of Real Estate Appraisers Columbus, Ohio (DEc. 7, 1990)	Speech	$1,500.00	
**(of this amount, $7,198.00 was contributed to charity)			

Reporting Individual's Name
Chalmers Pangburn Wylie

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock		X								X								X								X
		George Wash. Credit Union Accounts			X									X								X						
		182 Main Street, Dover, Delaware				X							X								X							
	Prudential Life Insurance Company			X										X						X								
	Mutual of New York			X										X					X									
	Government Life Ins. Policy #V6 243377			X										X					X									
s	Bank One CD				X									X							X							
s	Freedom Federal CD				X									X								X						
	258 E. Jeffrey Place, Columbus, OH				X							X							X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Chalmers Pangburn Wylie

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	3430 Galt Ocean Drive, Ft. Lauderdale, Florida					X				none								X								

Reporting Individual's Name
Chalmers Pangburn Wylie

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
Example	ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Citizens Federal	Mortgage on 258 E. Jeffrey Pl., Columbus, OH		X					
	BancOhio National Bank	Personal Auto Loan	X						

Reporting Individual's Name
Chalmers Pangburn Wylie

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
National Assn. of Home Builders	Jan.18-19, 1990	Roundtrip air from Columbus, OH to Atlanta, 1 night lodging	
Chicago Mercantile Exchange & Chicago Board of Trade	Mar.18-19, 1990	Roundtrip air from Columbus, OH to Chicago(to Wash,DC) and 1 night lodging	
Public Securities Assn.	April 27-28, 1990	Roundtrip air from Columbus,OH to White Sulphur Springs, West VA, 1 night lodging	
American Instit. of Real Estate Appraisers	Mar.8,1990	Roundtrip air from Wash.,DC to Pittsburgh	
Nat'l Assn. of Realtors	Nov8-11,'90	Roundtrip air from Columbus,OH to New Orleans,3nights lodging, self and spouse	
~~Securities Industry Assn.~~	~~Dec 1, 1990~~	~~Roundtrip air from Columbus,OH to Ft. Lauderdale, self and spouse~~	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

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Reporting Individual's Name

Chalmers Pangburn Wylie

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [X]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature]

DATE (Month, Day, Year): May 15, 1991

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 13 AM 10:01
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

SIDNEY R. YATES
(Full Name)

2109 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: IL District: 9th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

Mc (Office Use Only) 20

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [X]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	

For additional earned income, use next page

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Reporting Individual's Name

SIDNEY R. YATES

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock	X								X								X								X
			George Wash. Credit Union Accounts		X									X								X						
			182 Main Street, Dover, Delaware			X							X								X							
	Common Stock Aon Corp				X							X								X								
	Common Stock Hubell Corp					X						X									X							
	Common Stock IBM Corp				X							X									X							
	Common Stock Lehman Corp			X								X							X									
	Common Stock Wang Laboratories Corp			X								X							X									
	continued																											

For additional assets and unearned income, use next page

continued

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Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Vanguard Muni Money Market Fund						X				X												X				
	Vanguard Muni Intermediate Fund					X					X												X				
	Birmingham, AL PHA Bond			X									X						X								
	Monroe, LA PHA Bond				X								X						X								
	Boaz, LA PHA Bond			X									X						X								
	Baltimore, MD PHA Bond			X									X							X							
	San Francisco, CA PHA Bond		X										X						X								
	Duluth, MN PHA Bond			X									X							X							
	Granite City, IL PHA Bond			X									X							X							
	Steubenville, OH PHA Bond			X									X							X							
	North Carolina State Bond		X										X							X							
	Knoxville, TN PHA Bond			X									X							X							
	Hartford, CT Civic Center Bond		X										X						X								
	Wilmington, DE PHA Bond		X										X						X								
	Tulsa, OK PHA Bond			X									X							X							

continued

Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Ennis, TX PHA Bond		X										X						X								
	Chicago, IL PHA Bond			X									X						X								
	Joliet County, IL PHA Bond			X									X						X								
	Reno, NV Hospital Revenue Bond			X									X								X						
	Blytheville, AR PHA Bond			X									X							X							
	Galveston, TX PHA Bond				X								X									X					
	Honolulu, HI Bond				X								X									X					
	Columbus, MS PHA Bond			X									X						X								
	Chattanooga, TN PHA Bond			X									X						X								
	Springfield, IL PHA Bond			X									X						X								
	Kinston, NC PHA Bond			X									X						X								
	Intermountain, UT Power Agency Bond				X								X									X					
	Jacksonville, FL PHA Bond		X										X						X								
	Decatur, AL PHA Bond			X									X								X						
	Philadelphia, PA PHA Bond		X										X					X									

continued

Reporting Individual's Name: SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Cook County, IL PHA Bond			X									X							X							
	Oklahoma City, OK PHA Bond			X									X								X						
	Providence, RI PHA Bond			X									X						X								
	St. Louis, MO PHA Bond		X										X						X								
	Minneapolis, MN PHA Bond			X									X							X							
	Springfield, MA PHA Bond		X										X						X								
	Philadelphia, PA PHA Bond		X										X						X								
	Nashville, TN PHA Bond			X									X						X								
	South Bend, IN PHA Bond			X									X						X								
	Waco, TX PHA Bond				X								X									X					
	New York City PHA Bonds				X								X								X						
	Detroit, MI PHA Bonds					X							X									X					
	Boston, MA PHA Bonds			X									X							X							
	Kansas City, MO PHA Bonds				X								X								X						
	American National Bank Account			X									X							X							

continued

Reporting Individual's Name

SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	S, DC, JT	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	American National Bank CD 12/07/89 - 01/08/90			X									X						X								X
	American National Bank CD 11/29/89 - 09/17/90				X								X										X				X
	American National Bank CD 06/08/90 - 10/09/90				X								X									X					X
	Harris Bank CD 12/06/89 - 10/04/90				X								X										X				X
	Harris Bank CD 10/04/90 - 01/02/91				X							none						X									X
	American National Bank T-Bill 05/02/90 - 06/07/90				X								X						X								X
	American National Bank T-Bill 09/17/90 - 11/15/90					X							X								X						X
	American National Bank T-Bill 09/21/90 - 12/20/90			X									X						X								X
	American National Bank T-Bill 10/09/90 - 01/03/91				X							none						X									X
	Treasury direct T-Bill 06/14/90 - 09/13/90			X									X							X							X
	Birmingham, AL PHA Bond			X										X							X						X
	Monroe, LA PHA Bond				X									X									X				X
	Boaz, AL PHA Bond			X										X						X							X
	Baltimore, MD PHA Bond			X										X				X									X
	San Francisco, CA PHA Bond		X											X						X							X

continued

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Reporting Individual's Name: SIDNEY R. YATES

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Granite City, IL PHA Bond			X										X						X							X
	Real Estate Partnerships: Two Shopping Centers:						X										Partnership Distribution						X				
	a) Allied Stores Shopping Center, 19,539 acres																										
	Shelbyville Waterson Expressway St. Mathews, KY																										
	b) K-Mart Shopping Plaza, 20.10 acres Dixie Highway, Upper Hunters																										
	Trace, KY																										
	University Park, Apartment Building 1517 Secor, Toledo, OH			X														X									
	Watson & Taylor Ltd.-I Development and operation of			X													Partnership Distribution			X							
	warehouse facilities																										

Reporting Individual's Name

SIDNEY R. YATES

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X							X
	George Wash. Credit Union Accounts			X									X								X					
	182 Main Street, Dover, Delaware				X							X								X						
S	Common Stock Acorn Fund				X						X									X						
S	Preferred Stock Atlantic Richf.Corp				X						X								X							
S	Common Stock Coca Cola Corp			X							X								X							
S	Common Stock Ford Motor Corp		X								X									X						
S	Common Stock Odetics Corp		X								none							X								
S	Common Stock Occidental Pete Corp		X								X								X							

For additional assets and unearned income, use next page

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Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income														BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Common Stock Peoples Energy Corp		X								X								X							
S	Common Stock TRW Corp		X								X								X							
S	Preferred Stock TRW Corp		X								X							X								
S	Common Stock Transamerica Corp		X								X							X								
S	Common Stock Toreador Royalty Corp		X									none						X								
S	Vanguard Muni Money Market Fund				X						X											X				
S	Vanguard Muni Intermediate Fund				X						X											X				
S	Gainesville, FL PHA Bond		X										X						X							
S	Jacksonville, FL PHA Bond			X									X						X							
S	Johnson County, IL PHA Bond		X										X					X								
S	Atlanta, GA PHA Bond			X									X							X						
S	Tacoma, WA PHA Bond		X										X					X								
S	New York City, NY PHA Bonds			X									X						X							
S	Baltimore, MD PHA Bonds			X									X							X						
S	El Paso, TX PHA Bond			X									X							X						

continued

Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Los Angeles, CA PHA Bond			X									X						X								
S	Columbus, OH PHA Bond			X									X						X								
S	Chicago, IL PHA Bonds			X									X							X							
S	Rome, GA PHA Bond				X								X								X						
S	Decatur, AL PHA Bond			X									X							X							
S	Plano, TX Bond			X									X								X						
S	Cordele, GA PHA Bond			X									X						X								
S	Cook County, IL PHA Bond			X									X						X								
S	Indianapolis, IN PHA Bond			X									X							X							
S	Wichita Falls, TX PHA Bond			X									X							X							
S	Bridgeport, CT PHA Bond		X										X						X								
S	Pinellas County, FL PHA Bond		X										X						X								
S	Salt River, AZ Bond		X										X						X								
S	Illinois State Bond			X									X							X							
S	Phoenix, AZ PHA Bond		X										X						X								

continued

Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Minneapolis, MN PHA Bond				X								X								X						
S	Yolo County, CA PHA Bond		X										X						X								
S	New York State Bond			X									X							X							
S	Clark County, NV Bond			X									X									X					
S	American National Bank Accounts		X										X							X							
S	American National Bank CD 12/06/89 - 01/05/90				X								X						X								X
S	American National Bank CD 11/16/89 - 01/16/90				X								X							X							X
S	American National Bank CD 12/14/89 - 02/15/90			X									X						X								X
S	American National Bank CD 02/15/90 - 08/21/90				X								X							X							X
S	American National Bank CD 05/21/90 - 07/20/90				X								X							X							X
S	American National Bank CD 05/24/90 - 07/25/90				X								X							X							X
S	American National Bank CD 06/08/90 - 10/09/90				X								X								X						X
S	Harris Bank CD 12/06/89 - 10/04/90				X								X									X					X
S	Harris Bank CD 10/04/90 - 01/02/91				X							none						X									X
S	Harris Bank CD 12/18/89 - 1-/04/90				X								X								X						X

continued

PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: SIDNEY R. YATES

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	American National Bank T-Bill 01/16/90 - 05/24/90				X								X							X						X
S	American National Bank T-Bill 05/02/90 - 06/07/90				X								X					X								X
S	American National Bank T-Bill 07/05/90 - 10/04/90				X								X						X							X
S	American National Bank T-Bill 07/20/90 - 10/18/90				X								X						X							X
S	American National Bank T-Bill 07/25/90 - 10/25/90				X								X						X							X
S	American National Bank T-Bill 09/21/90 - 12/20/90				X								X						X							X
S	American National Bank T-Bill 07/20/90 - 10/18/90				X								X						X							X
S	American National Bank T-Bill 10/04/90 - 01/03/91				X							none					X									X
S	American National Bank T-Bill 10/09/90 - 01/03/91				X							none					X									X
S	American National Bank T-Bill 10/19/90 - 01/17/91					X						none					X									X
S	American National Bank T-Bill 10/26/90 - 01/24/91				X							none					X									X
S	Treasury direct T-Bill 01/11/90 - 04/12/90				X								X						X							X
S	Treasury direct T-Bill 04/19/90 - 10/18/90				X								X							X						X
S	American National T-Note 12/20/90 - 12/31/91				X								X					X								X
S	Common Stock Unicoa Corp		X											X							X					X

continued

Reporting Individual's Name
SIDNEY R. YATES

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Johnson City, IL PHA Bond		X											X					X								X
S	Atlanta, GA PHA Bond			X										X						X							X
S	Tacoma, WA PHA Bond		X											X					X								X
S	New York City, NY PHA Bond		X											X						X							X
S	El Paso, TX PHA Bond			X										X					X								X
S	Baltimore, MD PHA Bond			X										X					X								X
S	Los Angeles, CA PHA Bond			X										X							X						X
S	Acorn Fund				X									X							X						X
S	Alpha I Theatre Partnership, Motion Picture Theatre, Louisville, KY		X														Partnership Distribution			X							
S	Freeport-McMoran Resource Partners, Limited Partnership, New Orleans LA			X													Partnership Distribution			X							
S	Palm Springs Properties Partnership Spa, Palm Springs, CA		X										none					X									
S	Henderson Manor, Return of Investment from Liquidated Company	X															Return of Investment			X							

Reporting Individual's Name

SIDNEY R. YATES

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	American National Bank T-Bill	X	X		05-02-90 06-07-90			X				
	American National Bank T-Bill	X	X		09-17-90 11-15-90				X			
	American National Bank T-Bill	X	X		09-21-90 12-20-90		X					
	American National Bank T-Bill	X			10-09-90			X				
	Treasury direct T-Bill	X	X		06-14-90 09-13-90		X					

continued

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name

SIDNEY R. YATES

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Birmingham, AL PHA Bond		X		matured 05-01-90		X					
	Monroe, LA PHA Bond		X		matured 06-01-90			X				
	Boaz, AL PHA Bond		X		matured 06-01-90		X					
	Baltimore, MD PHA Bond		X		matured 07-01-90		X					
	San Francisco, CA PHA Bond		X		matured 08-01-90	X						
	Duluth, MN PHA Bond		X		matured 09-01-90		X					
	Granite City, IL PHA Bond		X		matured 12-01-90		X					
	Quarterly Dividend Reinvestment to Purchase Shares of IBM Corp	X			quarterly	X						

Reporting Individual's Name

SIDNEY R. YATES

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	American National Bank T-Bill	X	X		01-16-90 05-24-90			X				
S	American National Bank T-Bill	X	X		05-02-90 06-07-90			X				
S	American National Bank T-Bill	X	X		07-05-90 10-04-90			X				
S	American National Bank T-Bill	X	X		07-20-90 10-18-90			X				
S	American National Bank T-Bill	X	X		07-25-90 10-25-90			X				

continued

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

Reporting Individual's Name
SIDNEY R. YATES

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	American National Bank T-Bill	X	X		09-21-90 12-20-90			X				
S	American National Bank T-Bill	X	X		07-20-90 10-18-90			X				
S	American National Bank T-Bill	X			10-04-90			X				
S	American National Bank T-Bill	X			10-09-90			X				
S	American National Bank T-Bill	X			10-19-90					X		
S	American National Bank T-Bill	X			10-26-90			X				
S	Treasury direct T-Bill	X	X		01-11-90 04-12-90			X				
S	Treasury direct T-Bill	X	X		04-19-90 10-18-90			X				
S	American National Bank T-Note	X			12-20-90			X				
S	Unicoa Corporation Common Stock		X		01-24-90		X					
S	Gainesville, FL PHA Bond		X		matured 02-01-90	X						
S	Jacksonville, FL PHA Bond		X		matured 02-01-90		X					
S	Johnson County, IL PHA Bond		X		matured 04-01-90	X						
S	Atlanta, GA PHA Bond		X		matured 05-01-90		X					
S	Tacoma, WA PHA Bond		X		matured 06-01-90	X						

continued

Reporting Individual's Name

SIDNEY R. YATES

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
S	New York City, NY PHA Bond		X		matured 06-01-90	X						
S	Baltimore, MD PHA Bond		X		matured 07-01-90		X					
S	El Paso, TX PHA Bond		X		matured 07-01-90		X					
S	Los Angeles, CA PHA Bond		X		matured 11-01-90		X					
S	Acorn Fund Income Reinvestment	X			07-18 and 12-21-90	X						

Reporting Individual's Name

SIDNEY R. YATES

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [ ]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135
The Phi Beta Kappa Society	Award (Check endorsed over to the University of Chicago, Humanities Division Fund)	$1,250
	Cleared by House Committee on Standards of Official Conduct on 12-07-90	

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22.

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
SIDNEY R. YATES

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Partner	See Partnerships

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee . . Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S.C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Sidney R. Yates	5/10/91

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 14 PM 2:55
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Gus Yatron
(Full Name)

1908 Hessian Road
(Mailing Address)

Reading, PA 19602

Filer Status	[X] Member of the U S House of Representatives	State PA District 6th	[ ] Officer or Employee	Employing Office.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

MC (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct) For a spouse, list the source and an amount of any honoraria, only the source need be reported for other spouse earned income For further information, see Instructions, page 10

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash , D C (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Commonwealth of Pennsylvania	Pension	$8275.00	
	District 2 MEBA - AMO Washington, DC (2/26/90)	Speech	$2000.00	

For additional earned income, use next page

4772

Reporting Individual's Name
Gus Yatron

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																	Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Prudential Insurance Co, Reading, PA			X									X							X							
	New York Life Insurance, Reading, PA		X										X					X									
	Meridan Bank, Reading, PA (Savings)		X										X							X							
	Penn Savings Bank, Reading, PA (Savings		X										X							X							
	Pa. Nat. Bank, Pottsville, PA (Savings)		X										X					X									
S	Eldorada Systems Stock (Spouse)	X									X							X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name
Gus Yatron

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S	Consolidated Gold Standard Resources																									
	Inc, Stock	X									X							X								
	Gold Maple Leafs - Canadian Coins		X														None	X								
	U. S. Saving Bonds					X											None	X								
	24 Muirfield Drive, Reading, PA				X							X									X					
	139 N. 8th St. Reading, PA			X								X										X				
	122 Leisure Court, Reading, PA					X						X											X			

Reporting Individual's Name: Gus Yatron

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY. YR)	Amount of Transaction: B $1 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10 001 - $15 000	C $15 001 - $50 000	D $50 001 - $100 000	E $100 001 - $250 000	F $250 001 - $500 000	G $500 001 - $1 000 000	H over $1 000 000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Penn Mortgage Co, Reading, PA	Mortgage on 24 Muirfield Drive Reading, PA			X				
	MeridianBank, Reading, PA	Mortgage on 122 Leisure Court, Reading, PA				X			

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Reporting Individual's Name
Gus Yatron

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you For further information see Instructions, pages 20-22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U S.C. 7342)

Reporting Individual's Name

Gus Yatron

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [XX]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23

NONE [X]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Gus Yatron	5/14/91

GPO 1991 37-598 (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

91 MAY 15 PM 4:51
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

C. W. Bill Young
(Full Name)

2407 Rayburn HOB, Washington, D.C. 20515
(Mailing Address)

Filer Status	[x] Member of the U.S. House of Representatives	State Florida District: Eight	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Cubic (January 9, 1990)	Speech	$2000	
	Marquardt (January 12, 1990)	Speech	$2000	
	Rockwell (January 17, 1991)	Speech	$2000	
	TRW (January 23, 1991)	Speech	$2000	
	VARO (January 30, 1991)	Speech	$1000	
	Northrop (January 31, 1991)	Speech	$2000	
	E-Systems (February 1, 1991)	Speech	$2000	
	General Atomics (February 6, 1991)	Speech	$2000	
	Aerojet (February 9, 1991)	Speech	$2000	
	Hughes (February 14, 1991)	Speech	$2000	

For additional earned income, use next page

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Reporting Individual's Name
C. W. Bill Young

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Precision Echo (February 14, 1991)	Speech	$2000	
LTV (February 21, 1991)	Speech	$2000	
Bell Helicopter (January 31, 1991)	Speech	$2000	
AMA (March 14, 1991)	Speech	$1000	

Reporting Individual's Name

C. W. Bill Young

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3 For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	**BLOCK B** Valuation of Asset									**BLOCK C** Income															**Block D**
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Note receivable from Judith Flynn				X								X									X					

For additional assets and unearned income, use next page

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Reporting Individual's Name

C. W. Bill Young

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child Check the highest amount owed during the reporting period Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

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Reporting Individual's Name
C. W. Bill Young

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D C. to Seattle, 3 days food & lodging, self and spouse	
Hughes, Cubic, General Atomics, TRW, Rockwell, Aerojet, Northrop, Marquardt	Jan. 8-12, 1990	Roundtrip Air Travel from Washington, D.C. to Los Angeles	
		Roundtrip Air Travel from Los Angeles to San Diego, 5 days food and lodging - shared expenses in conjunction with	
		8 speeches at 8 companies	
Bell Helicopter, LTV, VARO, E-Systems	Jan. 15-17, 1990	Roundtrip Air Travel from Washington, D.C. to Dallas/Ft.	
		Worth, Tex., 3 days food and lodging - shared expenses in conjunction with 4 speeches at 4 companies	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Continuation of Part VII - Reimbursements and Gifts of Transportation, Lodging, Food, Entertainment for C. W. Bill Young

Source	Date(s)	Brief Description
Precision Echo a division of DRS	January 18-21, 1991	Roundtrip Air Travel from Washington D. C. to San Francisco Ca., 2 days food and lodging, 1 extra day at own expense in conjunction with speech
AMA	March 16, 1991	Roundtrip Air Travel from Washington, D. C. to Tampa, Fla. for spouse and 1 day food and lodging for Member and spouse in conjunction with speech

Reporting Individual's Name
C. W. Bill Young

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [x]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

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Reporting Individual's Name
Gus Yatron

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [XX]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [X]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [X] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5) Yes [ ] No [X] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Gus Yatron	5/14/91

4777

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990	FORM A For use by Members, officers, and employees

91 MAY 15 PM 4:51
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 7

C. W. Bill Young
(Full Name)

2407 Rayburn HOB, Washington, D.C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State Florida District Eight	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples: Association of American Associations, Wash., D.C. (Feb 2, 1990)	Speech	$1,000	
XYZ Magazine (Aug. 13, 1990)	Article	$500	X
ABC Corporation	Director's Fee	$8,000	
Fairfax County Board of Education	Spouse Salary	NA	
Cubic (January 9, 1990)	Speech	$2000	
Marquardt (January 12, 1990)	Speech	$2000	
Rockwell (January 17, 1991)	Speech	$2000	
TRW (January 23, 1991)	Speech	$2000	
VARO (January 30, 1991)	Speech	$1000	
Northrop (January 31, 1991)	Speech	$2000	
E-Systems (February 1, 1991)	Speech	$2000	
General Atomics (February 6, 1991)	Speech	$2000	
Aerojet (February 9, 1991)	Speech	$2000	
Hughes (February 14, 1991)	Speech	$2000	

For additional earned income, use next page

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Reporting Individual's Name
C. W. Bill Young

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Precision Echo (February 14, 1991)	Speech	$2000	
LTV (February 21, 1991)	Speech	$2000	
Bell Helicopter (January 31, 1991)	Speech	$2000	
AMA (March 14, 1991)	Speech	$1000	

Reporting Individual's Name

C. W. Bill Young

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income															Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X								X
	George Wash. Credit Union Accounts			X									X								X						
	182 Main Street, Dover, Delaware				X							X								X							
	Note receivable from Judith Flynn				X								X									X					

For additional assets and unearned income, use next page

4780

Reporting Individual's Name

C. W. Bill Young

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

Reporting Individual's Name
C. W. Bill Young

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hughes, Cubic, General Atomics, TRW, Rockwell, Aerojet, Northrop, Marquardt	Jan. 8-12, 1990	Roundtrip Air Travel from Washington, D.C. to Los Angeles	
		Roundtrip Air Travel from Los Angeles to San Diego, 5 days food and lodging - shared expenses in conjunction with	
		8 speeches at 8 companies	
Bell Helicopter, LTV, VARO, E-Systems	Jan. 15-17, 1990	Roundtrip Air Travel from Washington, D.C. to Dallas/Ft.	
		Worth, Tex., 3 days food and lodging - shared expenses in conjunction with 4 speeches at 4 companies	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4782

Continuation of Part VII - Reimbursements and Gifts of Transportation, Lodging, Food, Entertainment for C. W. Bill Young

Source	Date(s)	Brief Description
Precision Echo a division of DRS	January 18-21, 1991	Roundtrip Air Travel from Washington D. C. to San Francisco Ca., 2 days food and lodging, 1 extra day at own expense in conjunction with speech
AMA	March 16, 1991	Roundtrip Air Travel from Washington, D. C. to Tampa, Fla. for spouse and 1 day food and lodging for Member and spouse in conjunction with speech

Reporting Individual's Name
C. W. Bill Young

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [x]

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 15, 1991

GPO 1991 37-598 (m)

C.W. BILL YOUNG
8TH DISTRICT FLORIDA

MEMBER
COMMITTEE ON
APPROPRIATIONS

SUBCOMMITTEE ON
NATIONAL DEFENSE

Congress of the United States
House of Representatives
Washington, DC 20515

2407 RAYBURN BUILDING
WASHINGTON, DC 20515

DISTRICT OFFICES
SUITE 627
144 FIRST AVENUE SOUTH
ST. PETERSBURG, FL 33701

SUITE 806
801 WEST BAY DRIVE
LARGO, FL 34640

May 22, 1991 HAND DELIVERED

1991 MAY 31 PM 12 05

MC (8)

Mr. Donnald K. Anderson
Clerk of the House
U. S. House Of Representatives
H-105 The Capitol
Washington, D.C. 20515

Dear Donnald:

The financial disclosure statement I submitted to you covering calender year 1990 included typographical errors on a number of the dates involving Part I - earned income and Part VII - Reimbursements.

All of the identifying dates should have been listed as occurring in 1990 and a number of them were mistakenly identified as occurring in 1991.

Enclosed is a new financial disclosure form with the corrected typographical errors.

With best wishes and personal regards, I am
Very truly yours,

C. W. Bill Young
Member of Congress

CWY:dg

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

'91 MAY 31 PM 12:05

U.S. H. OF REPS.

HAND DELIVERED

(Office Use Only)

C. W. Bill Young
(Full Name)

2407 Rayburn HOB, Washington, D. C. 20515
(Mailing Address)

Filer Status	[x] Member of the U.S. House of Representatives — State: Florida District: Eight	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[x] Amendment	[ ] Termination — Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Cubic (January 9, 1990)	Speech	$2000	
	Marquardt (January 12, 1990)	Speech	$2000	
	Rockwell (January 17, 1990)	Speech	$2000	
	TRW (January 23, 1990)	Speech	$2000	
	VARO (January 30, 1990)	Speech	$1000	
	Northrop (January 31, 1990)	Speech	$2000	
	E-Systems (February 1, 1990)	Speech	$2000	
	General Atomics (February 6, 1990)	Speech	$2000	
	Aerojet (February 9, 1990)	Speech	$2000	
	Hughes (February 14, 1990)	Speech	$2000	

For additional earned income, use next page

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Reporting Individual's Name

C. W. Bill Young

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Precision Echo (February 14, 1990)	Speech	$2000	
LTV (February 21, 1990)	Speech	$2000	
Bell Helicopter (January 31, 1990)	Speech	$2000	
AMA (March 14, 1990)	Speech	$1000	

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: C. W. Bill Young

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Note receivable from Judith Flynn				X								X									X					

Financial Disclosure A-2(a)

4788

Reporting Individual's Name

C. W. Bill Young

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del				X			

4789

Reporting Individual's Name
C. W. Bill Young

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
Examples: ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hughes, Cubic, General Atomics, TRW Rockwell, Aerojet, Northrop, Marquardt	Jan. 8-12, 1990	Roundtrip Air Travel from Washington, D.C. to Los Angeles	
		Roundtrip Air Travel from Los Angeles to San Diego, 5days food and lodging - shared expenses in conjunction with	
		8speeches at 8 companies	
Bell Helicopter, LTV, VARO, E-Systems	January 15-17, 1990	Toundtrip Air Travel from Washington, D. C. to Dallas/ Ft. Worth, Tex. 3 days food and lodging - shared expenses	
		in conjunction with 4 speeches at 4 companies	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4790

Continuation of Part VII - Reimbursements and Gifts of Transportation, Lodging,Food, Entertainment for C. W. Bill Young

Precision Echo a division of DRS	January 18-21, 1990	Roundtrip Air Travel from Washington D. C. to San Francisco, Ca., 2 days food and lodging, 1 extra day at own expense in conjunction with speech, rental car
AMA	March 16, 1990	Roundtrip Air Travel from Washington, D. C. to Tampa, Fla. for spouse and 1 day food and lodging for Member and spouse in in conjunction with speech

Reporting Individual's Name
C. W. Bill Young

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 22, 1991

GPO 1991 37-598 (m)

4792

C.W. BILL YOUNG
8TH DISTRICT FLORIDA

MEMBER
COMMITTEE ON
APPROPRIATIONS

SUBCOMMITTEE ON
NATIONAL DEFENSE

Congress of the United States
House of Representatives
Washington, DC 20515

2407 RAYBURN BUILDING
WASHINGTON DC 20515

DISTRICT OFFICES
SUITE 627
144 FIRST AVENUE SOUTH
ST. PETERSBURG, FL 33701

SUITE 606
801 WEST BAY DRIVE
LARGO, FL 34640

May 22, 1991 HAND DELIVERED

1991 MAY 31 PM 12 05

MC (8)

Mr. Donnald K. Anderson
Clerk of the House
U. S. House Of Representatives
H-105 The Capitol
Washington, D.C. 20515

Dear Donnald:

The financial disclosure statement I submitted to you covering calender year 1990 included typographical errors on a number of the dates involving Part I - earned income and Part VII - Reimbursements.

All of the identifying dates should have been listed as occurring in 1990 and a number of them were mistakenly identified as occurring in 1991.

Enclosed is a new financial disclosure form with the corrected typographical errors.

With best wishes and personal regards, I am
Very truly yours,

C. W. Bill Young
Member of Congress

CWY:dg

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 31 PM 12:05

U.S. H... ...

HAND DELIVERED

(Office Use Only)

C. W. Bill Young
(Full Name)

2407 Rayburn HOB, Washington, D. C. 20515
(Mailing Address)

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: Eight	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Cubic (January 9, 1990)	Speech	$2000	
	Marquardt (January 12, 1990)	Speech	$2000	
	Rockwell (January 17, 1990)	Speech	$2000	
	TRW (January 23, 1990)	Speech	$2000	
	VARO (January 30, 1990)	Speech	$1000	
	Northrop (January 31, 1990)	Speech	$2000	
	E-Systems (February 1, 1990)	Speech	$2000	
	General Atomics (February 6, 1990)	Speech	$2000	
	Aerojet (February 9, 1990)	Speech	$2000	
	Hughes (February 14, 1990)	Speech	$2000	

For additional earned income, use next page

4786

Reporting Individual's Name

C. W. Bill Young

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Precision Echo (February 14, 1990)	Speech	$2000	
LTV (February 21, 1990)	Speech	$2000	
Bell Helicopter (January 31, 1990)	Speech	$2000	
AMA (March 14, 1990)	Speech	$1000	

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: C. W. Bill Young

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Note receivable from Judith Flynn				X								X									X					

Reporting Individual's Name

C. W. Bill Young

PART IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V—LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE [X]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

4789

Reporting Individual's Name
C. W. Bill Young

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [x]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
Hughes, Cubic, General Atomics, TRW Rockwell, Aerojet, Northrop, Marquardt	Jan. 8-12, 1990	Roundtrip Air Travel from Washington, D.C. to Los Angeles	
		Roundtrip Air Travel from Los Angeles to San Diego, 5days food and lodging - shared expenses in conjunction with	
		8speeches at 8 companies	
Bell Helicopter, LTV, VARO, E-Systems	January 15-17, 1990	Toundtrip Air Travel from Washington, D. C. to Dallas/ Ft. Worth, Tex. 3 days food and lodging - shared expenses	
		in conjunction with 4 speeches at 4 companies	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4790

Continuation of Part VII - Reimbursements and Gifts of Transportation, Lodging, Food, Entertainment for C. W. Bill Young

Precision Echo a division of DRS	January 18-21, 1990	Roundtrip Air Travel from Washington D. C. to San Francisco, Ca., 2 days food and lodging, 1 extra day at own expense in conjunction with speech, rental car
AMA	March 16, 1990	Roundtrip Air Travel from Washington, D. C. to Tampa, Fla. for spouse and 1 day food and lodging for Member and spouse in in conjunction with speech

Reporting Individual's Name
C. W. Bill Young

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 22, 1991

GPO: 1991 37-598 (m)

4792

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 2 44
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Donald Edwin Young
(Full Name)

2331 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Alaska District: At-Large	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only) 7

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Royal Carribean, Miami, FL (Jan. 22, 1990)	Speech	$2,000	
	McDermott, Inc., New Orleans, LA (Jan. 29, 1990)	Speech	$2,000	
	BP America, Cleveland, OH (Feb. 2, 1990)	Speech	$400	
	American Medical Association, Naples, FL (Mar. 15, 1990)	Speech	$2,000	
	National Ocean Industries, Wash., D.C. (Apr. 2, 1990)	Speech	$1,000	
	Mark Air, Anchorage, AK (Apr. 10, 1990)	Speech	$1,250	
	Alaska International Industry, Anchorage, AK (Apr. 10, 1990)	Speech	$1,250	
	Kennecott Corp., Salt Lake City, UT (May 5, 1990)	Speech	$1,000	
	Edison Electric Institute, Wash., D.C. (Jun. 4, 1990)	Speech	$2,000	
	Pacific Telecom, Wash., D.C. (Jun. 4, 1990)	Speech	$2,000	

For additional earned income, use next page

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Reporting Individual's Name
Hon. Don Young

PART I—EARNED INCOME, INCLUDING HONORARIA

Continuation Sheet (if needed)

Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
American Boiler Manufacturers Assoc. Hershey, PA (Jun. 18, 1990)	Speech	$2,000	
Crowley Maritime, Seattle, WA (Jul. 13, 1990)	Speech	$1,000	
BP America, Cleveland, OH (Jul. 20, 1990)	Speech	$2,000	
Bristol Bay Native Corp., Dillingham, AK (Aug.13, 1990)	Speech	$1,000	
Arctic Slope Regional Corp., Anchorage, AK (Aug. 14, 1990)	Speech	$1,000	
Pacific Seafood Processors., Seattle, WA (Oct. 15, 1990)	Speech	$2,000	
CIRI Native Corp., Anchorage, AK (Oct. 30, 1990)	Speech	$2,000	
Alaskans for Don Young	Spouse Salary	$3,302	

Reporting Individual's Name

Hon. Don Young

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																			Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).			Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X							X									X								X
			George Wash. Credit Union Accounts			X								X								X							
			182 Main Street, Dover, Delaware				X						X									X							
	Putnam Fund for Growth				X							X			X						X								
	Doyon, Limited, Fairbanks, AK (Non-Negotiable Stocks)		X									X							X										
	Alaska Permanent Fund		X									X								X									
S	Alaska Permanent Fund		X									X								X									
	State Farm Life			X										X						X									
	New York Life				X									X						X									

For additional assets and unearned income, use next page

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PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hon. Don Young

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
		Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)								
S, DC, JT	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	II $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	National Bank of Alaska	X											X					X									
	Wright-Patman Cong. Federal Credit Union (IRA)		X										X						X								
	Wright-Patman Cong. Federal Credit Union (SEP)			X									X							X							
	2835 Alderberry Trail				X							X							X								X

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Reporting Individual's Name
Hon. Don Young

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	2835 Alderberry Trail, Fairbanks, AK	X			7-25-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	National Bank of Alaska	Contract Collections			X				
		Agreement on: 2835 Alderberry Trail, Fairbanks, AK							

4797

Reporting Individual's Name: Hon. Don Young

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds, travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20-22.

NONE [ ]

Source	Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples: Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	
McDermott, Inc.	1-30-90 - 2-01-90	Roundtrip Air from Wash., D.C. to New Orleans, LA Self & Spouse food and lodging, 3 days	
BP America	2-02-90 2-04-90	Roundtrip Air from Wash., D.C. to Cleveland, OH 3 days food and lodging	
American Medical Assoc.	3-15-90 3-18-90	Roundtrip Air from Wash., D.C. to Naples, FL 3 days food and lodging, self and spouse	
Pacific Seafood Processors	10-15-90	Roundtrip Air from Wash., D.C. to Seattle, WA	
American Boiler manufacturers	6-18-90 6-19-90	Food and lodging for self and spouse in Hershey, PA	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
Hon. Don Young

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE [x]

Positions	Name of Organization

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23.

NONE [x]

Date	Parties To	Terms of Agreement

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes [ ] No [x] NA [ ]

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes [ ] No [x] NA [ ]

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Don Young	May 1, 1990

GPO 1991 37-598 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 PM 4:41
U.S. House of Representatives
HAND DELIVERED

William H. Zeliff Jr.
(Full Name)

Rt 16 B
(Mailing Address)

Jackson N.H 03846

Filer Status	[X] Member of the U.S. House of Representatives	State: N.H. District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MK (Office Use Only) 6

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U.S. Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb. 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug. 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$8,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Christmas Farm Inn Inc - Jackson NH 03846	Salary	$8785.00	
	Christmas Farm Inn Inc - Jackson NH 03846	Spouse Salary	N/A	

For additional earned income, use next page

4800

Reporting Individual's Name: William H. Zeliff Jr.

PARTS II and III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 14.

NONE ☐

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																		Block D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock		X								X								X									X
	George Wash. Credit Union Accounts			X									X								X							
	182 Main Street, Dover, Delaware				X							X								X								
JT	Christmas Farm Inn Inc - Jackson	X								Book Value							Gross Sales									X		
JT	Christmas Farm Inn - Jackson								X	Market Value		X												X				
JT	Yesterday's Rest - - Jackson						X					X											X					
JT	Jackson Corner - Jackson				X							X										X						

* note - Figures represent a 4/30 fiscal year - Records are not maintained on a calendar year basis - Christmas Farm Inn, as a corporation, has elected to be a sub chapter S

For additional assets and unearned income, use next page

4801

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: William W. Zeliff Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
	Category of Value (X)									Type of Income (X)							Category of Amount of Income (X)									
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT																										
Continued from 1st Page –																										
corporation to report its sales and income as part of the personal Tax																										
Returns of the Stock Holders. This gross sales figure includes operations at																										
three locations (Christmas Farm Inn, Natural Rest, and Jackson Corner).																										
Limited Partnership Broadcasting				X																						
— License only — no Expenses — no sales																										
Jackson Pines Group –	X																									
In process of being Liquidated																										
Amoskeag Bank Stock	X									X							X									
Worthington – Stock		X								X							X									
First Home Savings – Stock		X								X							X									
E.F. Hutton Money Market	X									X							X									
Personal Residences in Jackson and in Venice, Fla are Residences only –																										
no commercial activity and according to guidelines, do not need																										
to be reported.																										

Reporting Individual's Name
William H. Zeliff Jr.

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 17.

NONE [X]

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 17.

NONE [ ]

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Christmas Farm Inn, Jackson NH 03846	Stockholder Loans – Bunny & Sylvia Zeliff				X			
[redacted]	Woodstock National Bank and Trust Co	Loan – William H Zeliff Jr				X			
JT	1st NH Bank – White Mt Bank	CRE Mortgage							X
JT	" " "	Note From Bunny and Sylvia Zeliff						X	
JT	United Savings – Littleton, NH	Home Equity Line of Credit			X				
JT	Mr Harcot – North Conway, NH		X						
JT	Rooney Charles – Jackson NH		X						

Reporting Individual's Name
William H. Zeliff Jr.

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold. Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see instructions, page 18.

NONE ☒

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box.

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see instructions, pages 20–22.

NONE ☒

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C. to Chicago, and Lunch	
	ABC Corporation	Aug. 6–8, 1990	Roundtrip Air from Wash. D.C. to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

Reporting Individual's Name
William H. Zeliff Jr

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☒

Positions	Name of Organization

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☒

Date	Parties To	Terms of Agreement

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
William H. Zeliff Jr	May 15, 1991

GPO 1991 37-580 (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1990

FORM A
For use by Members, officers, and employees

1991 MAY 15 AM 10:12
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only) 9

DICK ZIMMER
(Full Name)

136 Locktown-Flemington Road
(Mailing Address)

Flemington, N.J. 08822

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

In all sections, please type or print clearly in black ink.

PART I—EARNED INCOME, INCLUDING HONORARIA

List the source, type, and amount of earned income, including honoraria, from any source (other than current employment by the U S Government) aggregating $200 or more during the preceding calendar year, as well as payments made or directed to charity in lieu of honoraria. (A separate confidential list of charities receiving payments on or after January 1, 1991, must be filed directly with the Committee on Standards of Official Conduct.) For a spouse, list the source and an amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 10.

NONE [ ]

	Source (Include date of receipt for honoraria)	Type	Amount	Mark (X) if directed or paid to charity
Examples:	Association of American Associations, Wash., D.C. (Feb 2, 1990)	Speech	$1,000	
	XYZ Magazine (Aug 13, 1990)	Article	$500	X
	ABC Corporation	Director's Fee	$6,000	
	Fairfax County Board of Education	Spouse Salary	NA	
	Johnson & Johnson	Salary, bonus, employee stock compensation award	57,163	
	Johnson & Johnson	Exercise of employee stock option (granted 12/3/80) See Part IV	205,950 (Difference between exercise price & market value)	
	State of New Jersey	Salary	55,000	
	Farm Income	Spouse— Sale of hay and lambs	NA	
	Historic Research Income	Spouse — fees	NA	

For additional earned income, use next page

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Reporting Individual's Name
DICK ZIMMER

PARTS II and III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held during the preceding year for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to the reporting individual by a spouse, child, parent or sibling of the reporting individual or that person's spouse, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs.

In **BLOCK B** indicate the category of value for each asset listed in Block A which had a fair market value exceeding $1,000 at the close of the preceding calendar year. Specify any alternative valuation method.

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details in Section IV on page A-3. For more details, see Instructions, pages 12-14.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 14.

NONE ☐

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															Block D
Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC).		Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X								X								X
George Wash. Credit Union Accounts				X									X								X						
182 Main Street, Dover, Delaware					X							X								X							
	Johnson & Johnson Common Stock					X					X									X							X
Jt	Dreyfus A-Bonds Plus		X								X								X								
Jt	Dreyfus Growth Opportunity Fund		X								X								X								
Jt	Dreyfus N.J. Municipal Bond Fund		X								X								X								X
Jt	Dreyfus N.J. Municipal Bond Fund		X											X					X								X
Jt	Dreyfus N.J. Tax Exempt Money Market Fund			X									X							X							X

For additional assets and unearned income, use next page

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PARTS II AND III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: DICK ZIMMER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income															BLOCK D
	Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	Category of Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A none (or less than $1,001)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Jt	Dreyfus Liquid Assets (IRA)		X										X							X							
S	Dreyfus Third Century Fund (IRA)		X								X							X									
Jt	South Shore National Bank		X										X					X									
Jt	Hopewell Twp. Municipal Bond		X								X								X								
Jt	Puerto Rico Electric PWR		X																								
Jt	N.J. Turnpike Authority Bond		X								X								X								
Jt	Flemington National Bank		X										X						X								
Jt	Somerset Savings Bank		X										X					X									
S	Somerset Savings Bank		X										X					X									
	State of N.J. Deferred Compensation Plan			X																							
	Johnson & Johnson Savings Plan			X																							
	Loan to Zimmer for Congress Committee			X																							X

Reporting Individual's Name
DICK ZIMMER

PART IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-90			X				
	Exercise of Johnson & Johnson Employee Stock Option granted 12/3/80	X	~~X~~		4-3-90					X		
	Sale of Johnson & Johnson Common Stock		X		4-10-90			X				
	Dreyfus N.J. Municipal Bond Fund		X		5 times in Jan/Feb 1990	X						
	Dreyfus N.J. Tax Exempt Money Market Fund	X	X		purchased 5 times at *				X			
	Loan to Zimmer for Congress Committee				4-14-90			X				

* various dates; sold 27 times at various dates

PART V – LIABILITIES

Report liabilities over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out, loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 17.

NONE ☐

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Raritan Credit Union	Stock loan		X					

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Reporting Individual's Name
DICK ZIMMER

PART VI—TANGIBLE GIFTS (GIFTS OTHER THAN TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT)

Report the source, a brief description, and value of all gifts other than transportation, lodging, food, or entertainment (disclosed in next section), aggregating $100 or more in value received by you, your spouse, and your dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported Gifts with a value of $75 or less need not be aggregated towards the $100 disclosure threshold Gifts to a spouse or dependent child totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $200 in most instances. For further information, see Instructions, page 18.

NONE [X]

Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter	$135

PART VII—"REIMBURSEMENTS" AND GIFTS OF TRANSPORTATION, LODGING, FOOD, ENTERTAINMENT

List the identity of the source and a brief description (including a travel itinerary, dates, and nature of expenses provided) of travel related expenses aggregating $250 or more received by you, your spouse, or a dependent child during the year Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor If the travel was a gift, rather than payment of expenses for an activity such as a fact-finding event or speaking engagement, indicate by marking the appropriate box

Exclusions: Travel-related expenses provided by federal, state, and local governments, or by a foreign government,* and reimbursements paid from campaign funds; travel provided to a spouse or dependent child totally independent of his or her relationship to you. For further information see Instructions, pages 20–22

NONE [X]

Source		Date(s)	Brief Description (Itinerary and Nature of Expenses)	Gift (X)
Examples:	Chicago Chamber of Commerce	Mar. 2, 1990	Roundtrip Air Travel from Wash. D.C to Chicago, and Lunch	
	ABC Corporation	Aug. 6-8, 1990	Roundtrip Air from Wash D C to Seattle, 3 days food & lodging, self and spouse	

*Required to be reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342)

4810

Reporting Individual's Name
DICK ZIMMER

PART VIII – POSITIONS

Report the identity of all positions, compensated or uncompensated held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization or any educational or other institution other than the United States For further information see Instructions, page 22

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature

NONE ☐

Positions	Name of Organization
Trustee	Natural Resources Education Foundation, Inc.
	See Attachment One

PART IX – AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation of payments by a former employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 23

NONE ☐

Date	Parties To	Terms of Agreement
1-12-82	State of N.J., Deferred Compensation Plan & Pension Plan.	Rights are vested pursuant to the terms of these plans. Employee & employer contributions have ceased.
1-9-76	Johnson & Johnson Savings Plan	

PART X – ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS – Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST – Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, §101 et seq.) The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app 6, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Dick Zimmer	5/13/91

GPO 1991 37 598 (m)

4811

DICK ZIMMER

Attachment One

All positions listed below were with Johnson & Johnson or one of its subsidiaries. Terms of all positions below ended before the undersigned took office as a Member of Congress.

Position	Name of Organization
General Attorney	Johnson & Johnson
Director Vice President Asst Secretary	Chicopee
Member Management Board	Professional Dental Care, A Division of J&J C.P., Inc.
Vice President Treasurer	Irex International, Inc.
Vice President Treasurer	Irex World Trade Corporation
Treasurer	Symed Care of Toledo, Ohio, Inc.
Asst Secretary	"A" Company, a Johnson & Johnson Company
Asst Secretary	A & O Surgical Co., Inc.
Asst Secretary	Applied Fiberoptics International, Inc.
Asst Secretary	Ethicon, Inc.
Asst Secretary	Immunobiology Research Institute, Inc.
Asst Secretary	Janssen Merger Co., Inc.
Asst Secretary	Johnson & Johnson
Asst Secretary	Johnson & Johnson Consumer Products, Inc.
Asst Secreatry	Johnson & Johnson Development Corporation
Asst Secretary	Johnson & Johnson Finance Corporation
Asst Secretary	Johnson & Johnson Health Management, Inc.
Asst Secretary	Johnson & Johnson Medical, Inc.

Richard A. Zimmer
Statement of Assets and Liabilities
as of 31 December 1990

Assets

1. Real Estate: 24.5 acres, Block 7 Lots 12, 12Q Delaware Township, Hunterdon Co., N.J.		297,800	Jt	297,800
2. Personal Property				
a. Farm tools, equipment		1,500	Jt	
b. Ford Tractor		2,000	Jt	
c. Livestock: 1 ram, 8 ewes		1,500	Jt	
d. Vehicles	1991 Ford Ranger	8,000	S	
	1989 Mercury Topaz	6,000		
e. Home furnishings and miscellaneous personal property		40,000	Jt	59,000
3. Cash: Savings Accts				
a. South Shore National Bank		1,057	Jt	
b. Raritan Credit Union		1,228		2,285
Cash: Checking				
a. Flemington National Bank		6,696	Jt	
c. Somerset Savings Bank (Farm Account)		1,260	Jt	
d. Somerset Savings Bank (Business Account)		2,176	S	
e. Dreyfus NJ Tax Exempt Money Market Fund		17,128	Jt	27,260
Cash Value Life Insurance Policies (estimated)	Connecticut SBLI	1,200	S	
	Provident Mutual	1,581	S	2,781
Prepaid Tuition, Yale University balance of one year		18,060	Jt	18,060
4. Securities (Stocks)				
a. Dreyfus Growth Opportunity Fund	962 shs @ 9.11	8,764	Jt	
b. J&J Common Stock	1570 shs @ 71.00	111,470		
c. J&J Stock Option	1000 shares (i) exercisable @ 43.09	0		120,234

Richard A. Zimmer, Assets & Liabilities, page 2

Assets, continued

5. Securities (Bonds)			
a. Dreyful A-Bonds Plus	804 shs @ 13.40	10,774 Jt	
b. Dreyfus NJ Tax Exempt Bond Fund	1122 shs @ 12.47	13,995 Jt	
c. NJ Turnpike Bond @ 10.375%, due 1/1/03	$5000 par value	5,557 Jt	
d. Hopewell Twp @ 7%	$10,000 par value	10,027 Jt	
e. Puerto Rico Electric Power Authority @ 6.95% due 7/1/2004 (ii)	$30,000 par value	11,269 Jt	
f. State of Israel		500	41,348
6. Savings Plans			
a. IRA Accounts:			
Dreyfus Liquid Assets		9,571	
Dreyfus Liquid Assets		4,717 S	
Dreyfus Third Century Fund		4,851 S	
b. Johnson & Johnson Savings Plan		79,970	
c. State of N.J. Deferred Compensation		70,258	
d. State of N.J. Pension (estimated)		9,800	179,167
7. Loan to Zimmer for Congress Committee		100,000	100,000
TOTAL ASSETS			847,935

	Liabilities		
1. Mortgage Loan First Fidelity Bank	@ 8-1/4%, due 9/1/2001	42,187 Jt	
2. Stock Loan, Raritan Credit Union	@ 9.5% due 12/7/93	19,143 Jt	
3. Life Insurance Loans (estimated)	Provident Mutual	731 S	
	Connecticut SBLI	986 S	
TOTAL LIABILITIES			63,047
NET WORTH as of 12/31/90			$784,888

(i) Not exercisable in 1990; terminated 1/2/91
(ii) Zero Coupon Bond
S = Spouse, Jt = Jointly Owned

DICK ZIMMER
12TH DISTRICT, NEW JERSEY

COMMITTEE ON GOVERNMENT OPERATIONS
SUBCOMMITTEES:
GOVERNMENT ACTIVITIES AND TRANSPORTATION
COMMERCE, CONSUMER, AND MONETARY AFFAIRS

COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY
SUBCOMMITTEES
SPACE
ENVIRONMENT

SELECT COMMITTEE ON AGING
SUBCOMMITTEE
HEALTH AND LONG TERM CARE

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
510 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5801

DISTRICT OFFICES
2325 PLAINFIELD AVENUE
SOUTH PLAINFIELD, NJ 07080
(908) 754-5115

1 MORRIS STREET
MORRISTOWN, NJ 07960
(201) 538-7267

(6)

MC

'91 JUL -1 PM 4:53

June 29, 1991

The Hon. Donnald Anderson
Clerk of the House
Office of Records and Registration
1036 Longworth HOB
Washington, D.C. 20515

Dear Mr. Anderson:

Please accept this amendment to my 1990 financial disclosure statement, which was filed on May 15 of this year. Attached are the appropriate pages of the disclosure form with additional information supplied as requested as well as an amended copy of my supplemental statement of assets and liabilities.

Under Parts II and III (Assets and "Unearned" Income), please add to my list of assets and/or income source the following:

1) Johnson & Johnson pension, valued between $50,001 and $100,000, with income of between $5,001 and $15,000. The type of income is an increase in present value.

2) State of New Jersey pension, valued between $15,001 and $50,000, with income between $201 and $1,000. The type of income is an increase in present value less employee contribution.

Also, please note the following changes in the same section:

Under state of New Jersey deferred compensation plan, the type of income should be listed as net increase from fixed income and equity funds, with amount of income between $1,001 and $2,500. Under the Johnson & Johnson Savings Plan, the type of income should be listed as net increase in guaranteed interest fund, with income between $1,001 and $2,500.

Please note under Part IX --(Agreements), new language showing the pension plan in addition to the Johnson and Johnson Savings plan.

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

And finally, please note that there should be no income listed for the loan to Zimmer for Congress Committee.

I also have enclosed an amended statement of my assets and liabilities to reflect the above changes and other minor adjustments.

Sincerely,

Dick Zimmer
Member of Congress

PARTS II AND III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

S, DC, JT	BLOCK A Asset and/or Income Source: Identify each asset and/or income source of yours, your spouse (S), and your dependent child (DC)	BLOCK B Valuation of Asset: Category of Value (X) A none (or less than $1,001)	B $4,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I none (or less than $201)	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
Jt	Dreyfus Liquid Assets (IRA)		X										X							X							
S	Dreyfus Third Century Fund (IRA)		X								X							X									
Jt	South Shore National Bank		X										X					X									
Jt	Hopewell Twp. Municipal Bond		X								X								X								
Jt	Puerto Rico Electric PWR		X																								
Jt	N.J. Turnpike Authority Bond		X								X								X								
Jt	Flemington National Bank		X										X						X								
Jt	Somerset Savings Bank		X										X					X									
S	Somerset Savings Bank		X										X					X									
	State of N.J. Deferred Compensation Plan				X												NET INCREASE FROM FIXED INCOME AND EQUITY FUNDS			X							
	Johnson & Johnson Savings Plan				X												NET INCREASE IN GUARANTEED INTEREST FUND			X							
	Loan to Zimmer for Congress Committee				X													X									X
	JOHNSON & JOHNSON PENSION				X												INCREASE IN PRESENT VALUE				X						
	STATE OF NEW JERSEY PENSION			X													INCREASE IN PRESENT VALUE LESS EMPLOYEE CONTRIBUTION		X								

Reporting Individual's Name
DICK ZIMMER

PART VIII—POSITIONS

Report the identity of all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information see Instructions, page 22.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature.

NONE ☐

Positions	Name of Organization
Trustee	Natural Resources Education Foundation, Inc.
	See Attachment One

PART IX—AGREEMENTS

Identify the date, parties to, and terms or any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation of payments by a former employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 23.

NONE ☐

Date	Parties To	Terms of Agreement
1-12-82	State of N.J., Deferred Compensation Plan & Pension Plan	Rights are vested pursuant to the terms of these plans. Employee & employer contributions have ceased effective 1-1-91
1-9-76	Johnson & Johnson Savings Plan + Pension Plan	

PART X—ADDITIONAL INFORMATION AND CERTIFICATION

TRUSTS—Do you, your spouse or dependent child have a beneficial interest in a trust or other financial arrangement whose holdings were not reported because the trust is a "Qualified Blind Trust" or other excepted trust? A Qualified Blind Trust is a trust which has been specifically approved by the Committee on Standards of Official Conduct. (See Instructions, page 15.) Yes ☐ No ☒ NA ☐

EXEMPTION TEST—Have you omitted any assets or liabilities of a spouse or dependent child because they meet the three tests for exemption? (See Instructions page 5.) Yes ☐ No ☒ NA ☐

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, §101 et seq.). The Statement will be made available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Dick Zimmer	5/13/91

GPO 1991 37-566 (m)

Richard A. Zimmer
Statement of Assets and Liabilities
as of 31 December 1990

Assets

1. Real Estate: 24.5 acres, Block 7 Lots 12, 12Q Delaware Township, Hunterdon Co., N.J.		297,800 Jt	297,800
2. Personal Property			
a. Farm tools, equipment		1,500 Jt	
b. Ford Tractor		2,000 Jt	
c. Livestock: 1 ram, 8 ewes		1,500 Jt	
d. Vehicles	1984 Ford Ranger	700 S	
	1989 Mercury Topaz	6,000	
e. Home furnishings and miscellaneous personal property		40,000 Jt	51,700
3. Cash: Savings Accts			
a. South Shore National Bank		1,057 Jt	
b. Raritan Credit Union		1,228	2,285
Cash: Checking			
a. Flemington National Bank		6,696 Jt	
c. Somerset Savings Bank (Farm Account)		1,500 Jt	
d. Somerset Savings Bank (Business Account)		2,186 S	
e. Dreyfus NJ Tax Exempt Money Market Fund		17,128 Jt	27,510
Cash Value Life Insurance Policies (estimated)	Connecticut SBLI	1,200 S	
	Provident Mutual	1,581 S	2,781
Prepaid Tuition, Yale University balance of one year		18,060 Jt	18,060
4. Securities (Stocks)			
a. Dreyfus Growth Opportunity Fund	962 shs @ 9.11	8,764 Jt	
b. J&J Common Stock	1630 shs @ 71.00	115,730	
c. J&J Stock Option	1000 shares (i) exercisable @ 43.09	0	124,494
5. Securities (Bonds)			
a. Dreyful A-Bonds Plus	804 shs @ 13.40	10,774 Jt	
b. Dreyfus NJ Tax Exempt Bond Fund	1122 shs @ 12.47	13,995 Jt	
c. NJ Turnpike Bond @ 10.375%, due 1/1/03	$5000 par value	5,557 Jt	

Richard A. Zimmer, Assets & Liabilities, page 2

Assets, continued				
d. Hopewell Twp @ 7%	$10,000 par value	10,027	Jt	
e. Puerto Rico Electric Power Authority @ 6.95% due 7/1/2004 (ii)	$30,000 par value	11,269	Jt	
f. State of Israel		500		41,348
6. Savings & Retirement				
a. IRA Accounts:				
Dreyfus Liquid Assets		9,571		
Dreyfus Liquid Assets		4,799	S	
Dreyfus Third Century Fund		4,851	S	
b. Johnson & Johnson Savings Plan		82,737		
c. State of N.J. Deferred Compensation		75,593		
d. J&J Pension (estimated)		66,312		
e. State of N.J. Pension (estimated)		40,535		284,398
7. Loan to Zimmer for Congress Committee		100,000		100,000
TOTAL ASSETS				950,376

	Liabilities			
1. Mortgage Loan First Fidelity Bank	@ 8-1/4%, due 9/1/2001	42,187	Jt	
2. Stock Loan, Raritan Credit Union	@ 9.5% due 12/7/93	19,143	Jt	
3. Life Insurance Loans (estimated)	Provident Mutual	731	S	
	Connecticut SBLI	986	S	
4. Credit Cards Primerica Bank	balance outstanding	3983	Jt	
TOTAL LIABILITIES				67,030
NET WORTH as of 12/31/90				$883,346

(i) Not exercisable in 1990; terminated 1/2/91
(ii) Zero Coupon Bond
S = Spouse, Jt = Jointly Owned

BOSTON PUBLIC LIBRARY
3 9999 06352 974 5